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FEDERAL, STATE, AND LOCAL RESPONSE TO THE DRUG CRISIS

HEARINGS

BEFORE A

SUBCOMMITTEE OF THE

COMMITTEE ON APPROPRIATIONS

UNITED STATES SENATE

ONE HUNDRED FIRST CONGRESS

SECOND SESSION

SPECIAL HEARINGS

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FEDERAL, STATE, AND LOCAL RESPONSE TO THE DRUG CRISIS

MONDAY, FEBRUARY 12, 1990

U.S. SENATE,
SUBCOMMITTEE ON COMMERCE, JUSTICE, AND STATE,
THE JUDICIARY, AND RELATED AGENCIES,
COMMITTEE ON APPROPRIATIONS,
Columbia, SC.

The subcommittee met at 9 a.m., in room 108, Solomon Blatt State Office Building, Columbia, SC, Hon. Ernest F. Hollings (chairman) presiding.

Present: Senators Hollings and Rudman.

NONDEPARTMENTAL WITNESSES

FEDERAL LAW ENFORCEMENT PANEL

STATEMENT OF HON. WILLIAM W. WILKINS, JR., CHAIRMAN, U.S. SENTENCING COMMISSION, THE JUDICIARY

Senator HOLLINGS. Good morning. The subcommittee will come to order. We appreciate particularly our colleague from New Hampshire, Senator Rudman, being with us. Today we open the fiscal year 1991 hearings for programs under the jurisdiction of the U.S. Senate Appropriations Subcommittee on Commerce, Justice, State, and the Judiciary. The hearing this morning will focus on Federal, State, and local law enforcement efforts in the war on drugs. Specifically, this subcommittee controls the funding of the Federal Bureau of Investigation, the Drug Enforcement Administration, the Bureau of Prisons, the U.S. Marshals Service, U.S. attorneys, the Immigration and Naturalization Service, the State and local drug grant program, as well as the Federal judicial system.

In fighting the war on drugs, I have had the privilege of serving with Senator Rudman—sometimes as ranking member when he is chairman, or when I am chairman he is the ranking member. Working in this field now for over 20 years, we realize we have professional witnesses that come to Washington but we don't often have the opportunity to really get down on the ground and hear just what needs to be done to mount an effective assault on illegal drug trafficking and distribution at the State and local level.

Straight to the point, with all the money that's being expended, we are still behind the curve in this war on drugs. We have been to the Golden Triangle up in Thailand and Laos. We have destroyed the poppy fields in Turkey some 15 years ago. Ten years ago it was the laboratories in Marseille, France. Then down in Peru and Bolivia, and now Colombia. If we close down Colombia in the next hour, it's this subcommittee's opinion the cocaine would still be produced on account of the tremendous demand. Something has to be done on the demand side, and within law enforcement something has to be done with respect to coordination.

Senator Rudman is an old time warrior, an infantry commander in Korea serving as his State's attorney general and now today in our U.S. Senate as a modern day Henry Clay, the compromiser. Warren Rudman can get all sides together in a very dynamic fashion, whether it be the budget or whether it be in law enforcement, with respect to the war on drugs or otherwise. We both worked year before last and last year in the special leadership task forces that designed our particular—well, now specifically President Bush's war on drugs. So with that introduction and comment, let me yield to my distinguished colleague.

Senator RUDMAN. Mr. Chairman, thank you. It's a great pleasure to join you today in South Carolina to hold hearings on the Federal, State, and local response to the drug crisis. I think it's safe to say that you and I have been as closely involved as any two Senators in the development of Federal drug and crime legislation, over the past number of years. As you stated, funding recommendations for justice and judiciary and many of the substantive reforms in criminal laws have been enacted on our appropriations bill, such as the Comprehensive Crime Control Act of 1984.

In the bill providing appropriations for the current fiscal year we modified the funding formula for State and local law enforcement drug grants in order to provide for a more equitable distribution of funds to smaller States such as South Carolina and New Hampshire and many others. In addition we retained the 25-percent State match for these funds for at least 1 more year rather than allow the match to increase to 50 percent which would have occurred under previous law.

It became clear last year that Congress faced a shortfall in drug funding. The chairman took the lead to recommend a method to fully meet the President's budget request for law enforcement activities. This resulted in an increase of $1.3 billion or 53 percent in the drug control budget of the Justice Department. I have only served in the Senate under Republican Presidents, but I can tell you with no fear of contradiction that no administration has had a better ally than Fritz Hollings on the war on drugs and crime.

Incidentally, Mr. Chairman, when the President said he was going to the drug summit in Colombia in February, I thought he meant he was going to join us here. I am sure he would get a lot warmer reception in South Carolina than he is likely to get in South America, but, anyway, I am delighted to join you here. I will say one further thing, Mr. Chairman, this will be the first hearing that you and I have been at together, and that numbers several hundred, in which people will have a harder time understanding me than understanding you.

Senator HOLLINGS. You've got that right. Happy Lincoln's Birthday. On Thursday, the 15th, our distinguished President will be in Colombia. We learned at another hearing last week, that there are six formative chemicals going into the manufacture of cocaine. One of the main ingredients is what they call methyl ethyl ketone, or

MEK. When we looked into the matter, we found that 80 percent of these particular chemicals were being shipped from the United States down into Colombia, for the manufacture of cocaine. So, rather than putting a blockade around Colombia, we need to put a blockade around the United States. We are the ones that are producing the chemicals through which cocaine is made.

Two years ago we had a conference with respect to chemical exports. An international group met and unanimously approved the control of the shipment of these drugs, but we have only had four countries sign the agreement. We are very hopeful that President Bush, at his summit later this week, can get the signatures of the other countries on the agreement. If we can do that, we can really put a chock in the wheel on the processing of cocaine.

Having said that, we both have come to listen and learn. I will never forget back in the legislature when we passed the sales tax in 1950, 40 years ago. I was a floor leader at the time and made 72 talks about it and Matthew Poliakoff of Spartanburg asked if I would yield and I said I would be glad to yield. He said, "the trouble with you, Hollings, is you have an impediment in your speech." I was thinking about that Charleston accent that you were referring to and I smiled and said, "Yes, what is that?" He said, "The trouble with you is you can't listen." So we have tried for 40 years and are still working to correct that impediment. We have come to listen.

To lead off we have our favorite and chief judge, Circuit Court Judge William Wilkins. Judge Wilkins, will you come forward, please, sir.

Judge Wilkins, as we all know, having served on the district bench and now the circuit bench and is the chairman of the U.S. Sentencing Commission, was President Reagan's choice for head of the FBI. But, due to family considerations, Judge Wilkins did not accept that post, but he is known over the country for his tremendous leadership in this particular field. Judge, we welcome you here at this time and we will be glad to hear from you now.

Judge WILKINS. Thank you very much, Mr. Chairman. I appreciate this opportunity to appear before this subcommittee to comment on the U.S. Sentencing Commission's role in the coordinated effort to combat illegal narcotics trafficking. I know this subcommittee has been supportive of the U.S. Sentencing Commission and is very familiar with our work.

In January last year the U.S. Supreme Court found the U.S. Sentencing Commission to be constitutional and thus approved the mandatory sentencing guidelines the Commission had earlier promulgated. This decision paved the way for full implementation of this new system of justice in our Federal courts across the country.

Taking stock of this full implementation during the past year I believe that the new sentencing system has brought about three very positive improvements. First, the system is now more honest. With the abolition of the old parole system we have truth in sentencing now for the first time in our Federal courts. The system is a fairer system because similar defendants who commit similar crimes receive a similar sentence and I believe the system is now more effective because certainty in which punishment is now imposed under the new guidelines system provides an increased deterrent to future criminal conduct.

The Sentencing Commission is charged with a number of responsibilities, one of which is to collect and analyze data from all the Federal courts around the country, and from this data it is apparent that the number of individuals being sentenced annually for drug offenses in our Federal courts has increased dramatically since the Congress passed the Anti-Drug Abuse Acts of 1986 and 1988. In 1985 approximately 10,000 individuals were sentenced in the Federal courts for drug offenses. Within 3 years this figure increased by more than 50 percent, and the proportion of offenders in the Federal system involved in drug activities is also on the increase. In 1985, 26 percent of defendants sentenced in the Federal courts were there for violations of narcotics laws. By October 1989 this figure had increased to 36 percent of all Federal defendants, and of offenders sentenced under the new guidelines system since January 1989, 48 percent of all defendants in the Federal courts are there as a result of conviction of some narcotics violation.

Today 48 percent of the prison population are inmates who have violated and have been sentenced for various narcotics offenses, and the Bureau of Prisons and the Commission projects that within 5 years 69 percent of all Federal inmates will be there because of narcotics violations. These statistics clearly demonstrate the percentage of resources from investigative agencies, from the U.S. attorney's offices, from the correction section, from the judiciary that has been steadily increasing over the past few years.

With respect to the severity of punishment, increased statutory penalties for drug trafficking and the implementation of the guidelines system and the abolition of the old parole system has resulted in a greater likelihood that, one, drug traffickers will go to prison, and, two, when incarcerated will serve longer terms than ever before. For example, in 1985 before the new act was passed and the guidelines implemented, 83 percent of drug traffickers received a prison term. That is 83 percent of defendants convicted of drug violations in the Federal courts went to prison, and the typical drug offender, however, was released from prison by the Parole Commission after serving less than 24 months.

In contrast, during the 1988–89 period 96 percent of the defendants who were charged and convicted of drug trafficking offenses in the Federal courts were sent to prison, and under the new guidelines system the average sentence for these defendants was 73 months, which if you take into account the possible reduction of 15 percent for good behavior now, the average time now served under the guidelines is in excess of 5 years compared to in excess of a little less than 2 years before.

I might add too that under the new guidelines system the primary determinant for sentencing a defendant is found in the 1986 and 1988 drug abuse statute, and the guidelines, as the statute does, determines the severity of the offense first upon the quantity of the drugs involved. So someone trafficking in 10 kilograms of cocaine would be sentenced on average more severely than someone trafficking in 1 kilogram.

Also, in a drug conspiracy, for example, involving 500 grams of cocaine, the average defendant would receive a sentence of about

60 months, but a defendant who is on the peripheral edge of that conspiracy and yet still convicted of the same statutory offense but is a minor participant, would receive about a 25-percent decrease in that sentence, and for the organizer of that conspiracy, the sentence would be approximately double that of the average defendant. Thus, the guideline system provides a uniform and systemic fashion and a method to target the more culpable defendants and requires sentencing proportionate to the degree of severity of their offense.

The guidelines also increase the sentence for individuals using dangerous weapons during drug violations and other statutory requirements such as selling or distributing drugs near schools to pregnant females or to individuals under the age of 18.

And, finally, Mr. Chairman and Senator Rudman, I want to point out for the first time now there is a real systematic way to target major drug offenders. In the past the opportunity was there but it depended upon the individual judge's view of what a serious drug offender was and the individual judge's philosophy about sentencing. Now under the guideline system if an individual has two prior drug convictions or crimes of violence and commits a third crime, this individual is labeled a career offender and the individual then is sentenced according to the guideline requirement at or near the statutory maximum penalty. So what we have tried to do with the guideline system is target those who are most heavily involved in this type of activity and impose the most severe sentence on those individuals. Thank you very much. I will submit my written comments for the record.

PREPARED STATEMENT

Senator HOLLINGS. Your statement in its entirety will be included in the record.

[The statement follows:]

STATEMENT OF JUDGE WILLIAM W. WILKINS, JR.

INTRODUCTION

Chairman Hollings, Senator Rudman, Other Members of the Subcommittee, Ladies and Gentlemen: As Chairman of the United States Sentencing Commission, I appreciate this opportunity to appear before this Subcommittee to comment on the Commission's role and perspective in the coordinated effort to combat illegal narcotics trafficking. I know that this subcommittee is very familiar with the Sentencing Commission and has been strongly supportive of its work.

Taking stock of full implementation of the guidelines during the past year, I believe that guideline sentencing has brought about three positive changes in the federal criminal justice system. First, the system is more honest -- with the abolition of parole, there is truth in sentencing for the first time in the federal courts. Second, the system is fairer -- similar defendants who commit similar crimes are sentenced in a similar manner. And third, the system is more effective -- the certainty by which punishment is imposed under the guidelines provides an increased deterrent to future criminal conduct.

Before turning to the specific topic under discussion today, let me briefly outline for the benefit of those who are less knowledgeable about the Commission the purposes for which Congress created the Sentencing Commission and the nature of our ongoing responsibilities.

After more than a decade of debate, the Congress, in a display of bipartisan support, enacted a comprehensive package of criminal justice reforms, central to which was the creation of the United States Sentencing Commission. The Sentencing Commission is an independent agency in the judicial branch composed of seven voting and two non-voting, ex officio members. Its principal purpose is to establish sentencing policies and practices for the federal criminal justice system by promulgating detailed guidelines prescribing the appropriate sentences for offenders convicted of federal crimes. On January 18, 1989, the United States Supreme Court held the Sentencing Reform Act and the Sentencing Commission to be constitutional. Since that date, the guidelines have been in effect throughout the nation.

The Sentencing Reform Act of 1984 provides for the development of guidelines that further the basic purposes of criminal punishment: deterrence, incapacitation, just punishment and rehabilitation. The Act delegates broad authority to the Commission to review and rationalize the federal sentencing process. The Commission is required to prescribe guideline ranges that specify an appropriate sentence for each class of convicted persons determined by coordinating offense behavior categories with offender characteristic categories. Where the guidelines call for imprisonment, by statute the range must be structured so that the maximum term of imprisonment cannot exceed the minimum by more than the greater of 25 percent or six months. The sentencing judge must select a sentence from within the guideline range. If, however, a particular case presents atypical features, the Act allows the judge to depart from the guidelines and sentence outside the range. Judges departing from the guidelines must state their reasons for doing so and such departures are reviewable for reasonableness by the courts of appeals. The Act also abolishes parole and substantially reduces and restructures good behavior adjustments.

The Commission's initial guidelines were submitted to Congress on April 13, 1987, after numerous hearings, extensive deliberation, and consideration of voluminous public comment. After the prescribed period of Congressional review, the guidelines took effect on November 1, 1987, and apply to all offenses committed on or after that date. The Commission has the authority to submit guideline amendments each year to Congress between the beginning of a regular Congressional session and May 1. Such amendments automatically take effect 180 days after submission unless rejected by Congress.

The Commission views the guideline-writing process as evolutionary. It expects, and the governing statute anticipates, that continuing research, experience, and analysis will result in modifications and revisions to the guidelines. To this end, the Commission is established as a permanent agency to monitor sentencing practices in the federal courts throughout the nation. The Commission is currently preparing a series of amendments -- including guidelines for revocation of probation and supervised release -- for publication in the Federal Register by mid-February. After a 45-day public comment period and a public hearing, the Commission will send a series of amendments to Congress on or before May 1.

MAGNITUDE OF DRUG PROBLEM

Mr. Chairman, much is said these days about the magnitude of the drug trafficking problem. Whether one focuses on the absolute numbers or on the rate of increase in recent years, the statistics are startling. The Sentencing Commission, of course, is primarily concerned with sentences imposed upon adjudication of guilt. In that regard, I would like to share with you some relevant statistical information that we have assembled.

According to FPSSIS data, the number of individuals sentenced annually for drug offenses in the federal system has increased dramatically since enactment of the Anti-Drug Abuse Acts of 1986 and 1988. In 1985, approximately 10,000 individuals were sentenced for drug offenses in the federal system. Early 1989 figures show an increase of almost 50 percent in this number, and the proportion of offenders in the federal system involved in drug activities also appears to be rising. In 1985, 26 percent of those offenders sentenced in the federal courts were convicted of drug offenses. From 1988 through October 1989, 36 percent of the defendants sentenced in federal courts were drug offenders. Of offenders sentenced under the guidelines since January 1989 (representing those whose offenses occurred after November 1, 1987), 48 percent were convicted of drug offenses. The Bureau of Prisons reports that 48 percent of its current prison population are convicted drug offenders and projects this figure will grow to 69 percent by 1995. In fact, 2 out of 3 current inmates who committed their offenses subsequent to November 1, 1987 (and consequently, were sentenced under the Sentencing Reform Act) are drug offenders. There is no question that the percentage of resources devoted to drug offenses has been rising steadily for the past several years.

With respect to severity of punishment, increased statutory penalties for drug trafficking and the implementation of guideline sentencing (coupled with elimination of parole) have resulted in a greater likelihood that drug traffickers will be sent to prison and if incarcerated will serve longer terms. In 1985, 83 percent of drug traffickers received prison terms, but the typical drug offender was released from prison by the Parole Commission after serving less than two years.

In contrast, during the 1988-89 period, 96 percent of those offenders sentenced for drug trafficking under the guidelines were sentenced to a period of imprisonment. The average sentence for these offenders is 73 months; with a possible 15 percent reduction in time served for good behavior, the average time served will be in excess of five years. During the same period, offenders still sentenced under the old law went to prison at a rate of 86 percent, but because they are eligible for parole, the average time served will be approximately 26 months.

Two other facets of the drug problem that may be of interest to the Subcommittee are changes in the type of illicit narcotics involved and the principal geographic locations of drug activity. Presently, drug cases in the federal system are more likely to involve cocaine than in the past. Fifty-five percent of offenders sentenced in 1988-89 were involved with cocaine, compared to 44 percent in 1985. Offenses involving heroin (currently at 9%), marijuana (28%), and other drugs (11%) have shown a slight decline in proportion over that period.

The districts of Southern Texas, Southern Florida, Western Texas, and Southern California account for 24 percent of the federal drug offenders sentenced. Eastern and Southern New York, Middle Florida, Eastern Michigan, and Arizona account for an additional 17 percent.

GUIDELINE SENTENCING OF DRUG OFFENDERS

Mr. Chairman, in view of the prevalence of drug offense convictions in the federal system and the relative novelty of the sentencing guidelines, it may be useful to the Subcommittee if I outline at this point how the sentencing guidelines apply to drug trafficking offenses.

The Commission's starting point, and the principal determinant of sentence severity for the drug guidelines, was the statute; i.e., the Controlled Substances Act, as amended by the Anti-Drug Abuse Act of 1986 (Pub. L. 99-570, Oct. 27, 1986). This Act provided stiff, mandatory minimum penalties for trafficking in the more common types of illegal drugs. For example, distributing 100 grams or more of heroin or 500 grams or more of cocaine carries a statutory minimum sentence of 5 years imprisonment, while trafficking in 1 kilogram or more of heroin or 5 kilograms or more of cocaine produces a mandatory minimum sentence of 10 years.

Using these statutory reference points and proportions, the Sentencing Commission constructed a set of guidelines for drug trafficking offenses involving lesser and greater quantities of each illicit controlled substance. For example, a cocaine trafficking offense involving at least 500 grams but less than 2 kilograms of cocaine, under the guidelines, would carry an offense level of 26, which for a first offender would produce a guideline range of 63-78 months of imprisonment. Note that this range is consistent with and slightly in excess of the mandatory minimum of 60 months applicable to this quantity of cocaine. Smaller quantities of cocaine produce proportionately lower offense levels; larger quantities produce proportionately higher offense levels such that a trafficking offense of 1,500 kilograms or more of cocaine produces a guideline range of 360 months to life imprisonment for a first offender. Furthermore, as with other offenses under the guidelines, sentence severity also varies in proportion to the relative seriousness of a defendant's prior criminal record. Thus, while a first offender trafficking in 500 grams of cocaine will face approximately 60 months in prison, a defendant with a substantial criminal record who commits the same offense will face a guideline sentence of 120 to 150 months, or at least twice as severe.

Building upon this basic scheme, the Commission implemented other provisions of the Controlled Substances Act and the Sentencing Reform Act. First, unlike the guidelines of the U.S. Parole Commission, the sentencing guidelines generally do not vary sentence severity according to drug purity. This policy conforms to the Congressional decision in the 1986 Anti-Drug Abuse Act to base statutory penalties on the weight of a substance or mixture containing any detectable amount of the illicit drug. (The statute and the guidelines make exceptions and consider purity for PCP and methamphetamine).

Second, in keeping with the Sentencing Reform Act's goal of punishing defendants who commit similar offenses in a similar manner, the guidelines take a generic approach to drug trafficking convictions. That is to say, it does not matter whether the defendant is convicted of drug distribution, importing, exporting, or a conspiracy or attempt involving different forms of drug trafficking. Even though different criminal statutes may be involved, they describe basically the same type of illegal activity -- drug trafficking -- and should be, and under the guidelines are, punished in a similar manner.

Third, also in furtherance of the general goal of ensuring that like situations are treated similarly, the Commission's guidelines for drug offenses generally take into account the full extent of a defendant's actual offense conduct, rather than simply the offense of conviction. This approach, which is called "Relevant Conduct," is entirely consistent with the manner in which most judges sentenced in the past and it has been upheld in the appellate courts, with one exception still under consideration. Under the principles of Relevant Conduct, the court is instructed to apply the guidelines for drug offenders according to the entire quantity of drugs involved in the drug scheme for which a defendant fairly should be held accountable based on a preponderance of reliable evidence. It does not matter how the indictment is framed, for at sentencing the defendant is sentenced for the actual misconduct in which he or she was involved. This approach ensures a more uniform sentencing result regardless of prosecutorial charging practices.

Fourth, the guidelines ensure similar punishment for similar crimes by drawing no distinction according to geographic location of the offense. Thus, whether the crime is committed in south Florida, South Carolina, or South Dakota, at sentencing all defendants, regardless of who they are or where they come from, will be fed from the same spoon. While there is something to be said for regional differences, the Commission reads the Sentencing Reform Act as emphasizing the greater importance of sentencing similar defendants who commit similar offenses in a similar manner, regardless of where the offense occurred.

Having emphasized the manner in which the guidelines strive for greater sentence similarity for like offenders, let me hasten to add that the guidelines also balance that goal against the need for proportional and individualized sentences. To illustrate, one of the important variables in sentencing for drug offenses is a defendant's role in the offense. Thus, in a scheme involving the importation of 100 kilograms (slightly more than 1 ton) of marijuana, for which the average sentence for a first offender would be 5 years, a defendant whose only role was to act as a lookout might be entitled to approximately a one-third reduction (assuming the mandatory minimum sentence was inapplicable), whereas the organizer of the operation could face an approximate doubling of the guideline sentence. This also illustrates how the guidelines target the more culpable participants and require a sentence in proportion to their degree of culpability, the most severe sentence being required for the kingpins.

In addition, the guidelines for drug distribution offenses enhance the sentence by approximately 25 percent for possession of a dangerous weapon in connection with the offense. Comparable increases are given for smuggling by aircraft (with a minimum sentence of five years) and for drug distribution near schools, to pregnant females, or involving persons under age 18.

As mentioned, with the implementation of mandatory guidelines the system is able to target selected individuals. For example, the guidelines provide severe punishment for repeat drug and violent crime offenders. A narcotics offender who has at least two prior offenses for either drug trafficking or crimes of violence, will be designated as a "Career Offender" and receive a guideline sentence at or near the statutory maximum for the offense. This means, for example, that large-scale drug dealers who have the requisite two prior, qualifying convictions will face a real-time sentence of at least 20 years and possibly life imprisonment. These are the individuals who deserve the maximum punishment allowed by law, and the "Career Offender" guideline is tailored to achieve that result.

RECENT GUIDELINE AMENDMENTS

Following the enactment of the Anti-Drug Abuse Act of 1988, the Commission promulgated revised guidelines to implement and build upon the new statutory penalties for drug and drug-related offenses. For example, in response to Congressional action raising penalties for drug "kingpins," the Commission revised its Continuing Criminal Enterprise (CCE) guideline to provide penalties between 20 years and life imprisonment depending on the type and the amount of the drugs involved in the offense. Moreover, in addition to the 20-year minimum sentence, as earlier mentioned, drug kingpins receive substantially higher penalties under the guidelines than do other drug offenders involved with similar types and amounts of drugs.

Similarly, in accordance with the mandatory 5-year minimum penalty enacted for possession of crack-cocaine, the Commission promulgated an emergency guideline that would ensure not only that the 5-year penalty was imposed, but also that possession offenses involving larger amounts of crack-cocaine receive increased sentences. Here again, the Commission interpreted Congressional concern regarding the easy availability, high profitability, and the extreme addictiveness of crack-cocaine as a strong policy basis for increasing penalties above the statutory minimum for possession.

The Commission has also recently increased penalties for several other drug-related offenses that create a special threat to the community. For example, for individuals convicted of operating a common carrier while under the influence of drugs or alcohol, the guidelines now provide a minimum penalty of over 3 years imprisonment if any person suffers serious bodily injury as a result of the offense; and should any person die as a result of the offense, the minimum penalty is increased to more than 5 years imprisonment. These penalties are subject to substantial increases where more than one person was injured or died as a result of the offense. Additionally, the guideline requires a minimum period of incarceration even if no injury results.

Currently, the Commission is reviewing a number of issues relating to the punishment of defendants involved in other drug related crimes. The Commission has approved for notice and comment a proposal concerning the treatment of "armed career criminals" under the guidelines. An armed career criminal is defined under 18 U.S.C. §924(e) as a felon or other person in possession of a firearm who has three previous convictions by either state or federal courts for a violent felony or a serious drug offense. The statute provides for a 15-year minimum term of imprisonment. Of particular concern to the Commission is ensuring that drug offenders prosecuted as armed career criminals receive penalties under the guidelines that are comparable to the penalties they would receive if punished as drug traffickers or drug kingpins. The Commission is also attempting to identify appropriate offender and offense characteristics by which to create gradations for increasing penalties above the minimum required by the statute.

The Commission has also published a proposal with respect to penalties for offenses under section 841(d) of Title 21 involving possession or distribution of listed essential and precursor chemicals. The proposed guideline would treat such offenses as attempts to manufacture controlled substances and would set penalty levels according to the amount of a controlled substance that could be produced from the essential chemicals involved in the offense. The Commission is seeking comment as well on appropriate penalty levels for trafficking in anabolic steroids. Although not a controlled substance under section 841, there has been increasing concern over the abuse of anabolic steroids, and Congress has recently established penalties for steroid trafficking offenses. We hope to promulgate a guideline that will ensure sufficient sentences to adequately punish and deter these offenses.

The Commission has also published a proposal with respect to offenses committed under section 843(b) of Title 21. That statute prohibits the use of communication facilities in committing a drug offense and carries a maximum term of imprisonment of 4 years. Within this statutory maximum, the Commission's proposal would provide for an increase in penalty tied to the amount of drugs involved in the offense.

SENTENCING ALTERNATIVES

Mr. Chairman, since this Subcommittee directly confronts, in one way or another, the resource costs associated with combatting drug trafficking, I believe it is appropriate to add a few comments regarding initiatives the Commission has undertaken to explore alternatives to traditional incarceration for federal offenders. Several months ago I authorized, and the Commission approved, a project that will take a comprehensive look at the array of sentencing alternatives with the objective of recommending new initiatives that can be made compatible with the sentencing guidelines structure. This project is going forward under the leadership of Commissioner Helen Corrothers, who has a strong background in corrections. She has assembled a prestigious, diversified advisory committee and is working closely with the Bureau of Prisons. The project involves a careful look at alternatives such as "boot camps" and intensive supervised probation. It is our hope that this effort will identify a number of new sentencing options, in addition to those already accommodated in the guidelines, that will be practical and effective in the federal criminal justice system.

SUPPLY SIDE NEEDS

Senator HOLLINGS. Judge Wilkins, at least we have restored now the credibility of the courts with respect to sentencing under your leadership. For years I have heard as a lawyer myself that, look you go to a certain judge and get a slap on the hand, pat on the back, pat on the head, probation and everything else. That is, if you have money and influence. The poor rascals, the courier, he is the one that serves the time, but the drug lord goes free.

With respect to your vantage point having been solicitor and tried and convicted others, been a judge having to sentence and now your premiere position of having been chairman of this Sentencing Commission, what need the Congress do now with respect to the supply side of the war on drugs? I'm speaking of the criminals, the offenders—whether it be money laundering, whether it be use of the military, whether it be any other facet that you can make as a suggestion to this subcommittee where we can beef up our efforts on the supply side?

DEPORTATION OF ALIEN DRUG COURIERS

Judge **Wilkins**. Let me say one of the problems that we continue to see from the Sentencing Commission, and that occurs in our ports of entry and border States. Almost 24 percent of the drugs come in from south Florida, from Arizona, southern Texas and southern California, and about 17 percent come in from New York and a couple of the other port cities. But, what is happening is large amounts of drugs are being smuggled in by aliens who are oftentimes illiterate individuals. They are just used as mules. The question is, what do you do with these people? One thing I think we can't say is "well, go back home and sin no more." We need to put them in prison, but that poses another problem; that is, what do you do with prison capacity and prison space? As we all know, that is a limited resource that we have.

I am just not sure that we profit as a Nation from locking these people up for long periods of time. The INS does a good job of deportation, but I was thinking, in talking to judges in these ports of entry, their problem is they would like to be able to deport them after service of some period of time. But, during that period of time these individuals could be read the riot act and be made to understand what will happen to them the next time if they come back again. Then have immediate deportation, and allow the district judge in the sentencing proceeding to sentence these individuals to 1 year in prison, for example, and then with immediate deportation.

Now the INS has to move through a civil hearing and certain defenses can be raised. I know on the fourth circuit I heard a case not long ago where the defendant was convicted of a serious drug offense and he served his time and he was in deportation hearings now and had been at large for 2 years in this country. So I am not sure, but a coordinated effort could be made with INS to think about some ways that the district court during the criminal proceeding could order deportation without any defenses allowed. For example, you couldn't claim amnesty, you couldn't claim you are a political prisoner and all those things that many claim. If you are coming in with drugs, you ought to be sent back, but you ought to be punished to some degree, but let's free up that prison space for our major drug dealers.

Senator **Hollings**. What would be the sentence if a courier or mule returns?

Judge **Wilkins**. If you returned, it would have to be very, very stiff, 10 years perhaps. We would have to throw the book at them if they come back again, but I really think most of them coming through here don't realize the severity of the crime they are committing, and the guidelines give them a pretty stiff sentence because we don't have any alternative. We didn't want to just say, "OK, you are a mule bringing this stuff in, here's 6 months, go back home and load up again." But, I think maybe a short-term imprisonment with an opportunity to advise these individuals what will happen if they come back may. It may be of some help to us.

Senator HOLLINGS. You have to cut out the attractiveness obviously. There were three of them I think—well, I am positive it was reported on that coverage of the Colombian plane crash up by Kennedy Airport in New York that one deceased had in his intestines quite a supply, and two others are waiting to recover in the hospital so they can be carried off to jail and be charged, because they still have in their intestines a cache of cocaine.

PAROLE

Senator RUDMAN. You know you are raising a very interesting point, Judge Wilkins, and it connects with the question I was going to ask you. We appreciate the work you have done. This is a unique approach we have taken to sentencing. It's an answer to decades of discontent—both with judges and law enforcement—by the public. We, of course, eliminated parole for all intents and purposes with the act, and I am just wondering, for certain nondrug-related, nonviolent offenses, and in light of the enormous problem this subcommittee is facing in funding money for new prisons, do you think that we ought to reexamine parole in terms of a limited number of nondrug, nonviolent offenses or do you think we ought to leave things about where they are? Do you think the guidelines take care of that?

Judge WILKINS. I think we ought to—we have eliminated parole, and that was a major improvement in itself and we shouldn't go back to that. See, under the new system a judge can impose in effect a parole term called supervised release, as you know, and that serves the same purpose.

Senator RUDMAN. Is that being done?

Judge WILKINS. Yes, sir; with just about every sentence of more than 1 year, 1 year or more will carry some term of supervised release imposed by the sentencing judge at the time the sentence is imposed, and if a violation occurs, then the defendant under the law comes back to the judge for perhaps revocation of supervised release.

ALTERNATIVE SENTENCING

Senator RUDMAN. In your written testimony you refer to a project in which you are going to examine sentencing alternatives such as boot camps which have been proposed by some and tried in some places. If your Commission determines that such alternatives are, in fact, feasible, has it been established you have the authority to include these alternatives under your sentencing guidelines?

Judge WILKINS. Yes, sir; it has. We absolutely have the authority to do it.

Senator RUDMAN. So we don't have to pass any new legislation to accomplish that, do we?

Judge WILKINS. You may have to pass some legislation providing for appropriations, for example, for electronic monitoring of the bracelets and those types of things that are not available to the probation offices around our country except on a limited basis now, but we are going to be examining those types of alternatives and come up with what we think is the ideal situation and come to you and say "Can we afford it?" And, if we can, we will work with the Congress in implementing the guidelines to dovetail with the funding availability.

Senator RUDMAN. That is exactly what I meant. Obviously we will have to do the appropriating, but you do have the authority now to say, for instance, we are going to have an alternative for certain levels of low level distribution, let's say, for people selling drugs, young people, a boot camp for a period of months or whatever, a year. If you want to establish that in your guideline, you have the authority to do that and you will have to say to us, "If you want us to implement this, you are going to have to give us the money to make sure that those facilities exist."

Judge WILKINS. That's correct.

FISCAL YEAR 1990 SUPPLEMENTAL

Senator RUDMAN. Since this is an appropriations hearing, let me ask you about your supplemental request to the Commission for $700,000, which in light of our normal budgetary requests is not a large amount of money. I never thought I would say that coming from New Hampshire, but having dealt with this subcommittee for years in which we throw out so many zeros that we spill anything beyond the last two. What is that $700,000 for?

Judge WILKINS. The Sentencing Reform Act requires the Commission to monitor and evaluate every sentence imposed in the Federal courts. Consequently we receive from every court the presentence report, the judgment, and commitment order, the statement of reason and transcript of the sentencing hearing, or summary of that, and from that we determine, one, is the sentence within guideline compliance. Two, if not, why. If there was plea negotiation involved, was it an appropriate plea negotiation and was it done in circumvention of the guidelines, has this judge been using a loophole to get around the guidelines, and there are many other things.

It's very important that we have this information because we can plug the loophole, we can make it better and we can add improvements and all those things, which we have been doing, and we are in this amendment process now. I don't guess anyone knew and understood the magnitude of this project when the legislation was first passed. I will tell you that I certainly as chairman when I was appointed had no idea, not only the amount of work involved but the tremendous flow of data information, and this is where the crunch has come in. We are now receiving about 45,000 packets a year, and it just takes a tremendous amount of time to analyze it and takes the people to do it, and this extra appropriation was calculated on how many minutes it takes to analyze each case and multiply that times the number of people needed.

Senator RUDMAN. I guess they will probably include that, but I was just curious what you need. How many people do you have in all doing this now?

Judge WILKINS. Well, we have got a total of 69 people counting the messengers and all the way up to the top people, but we need about 20 more people in this monitoring and evaluation, and we are probably going to need a big warehouse to put all this stuff in too. I don't know how we are going to keep this volume of cases coming in.

Senator **Rudman**. With the military bases they are talking about closing, we ought to have a lot of warehouse space.

Judge **Wilkins**. We might—could turn those into some level one institutions as well.

COURT SECURITY

Senator **Rudman**. Mr. Chairman, while Judge Wilkins is here I wonder if we might also inquire about security for the courts?

Senator **Hollings**. What about the security for the Federal courts? With the tragic bombings in Alabama and Savannah, GA, and the various threats upon the judiciary, what comment would you make about that?

Judge **Wilkins**. I think the Marshals Service is doing an excellent job. I don't know anything else that can be done. I think what happened in the tragedy in Alabama, and Maryland too, is one of those things. It's hard—that came in packaged mail and it came to the individual's residence, in this case to his private office. Those are just tragedies I don't think anything can stop. But, inside the Federal buildings, inside the courthouses, I think the security has been very good.

Senator **Hollings**. I guess we get used to threats. I introduced a value-added tax and two people from Texas threatened me. The FBI was trying to find out why.

Judge **Wilkins**. The fellow that doesn't threaten you is the one you worry about.

Senator **Rudman**. I think that is exactly right.

STREAMLINE JUDICIAL SYSTEM

Senator **Hollings**. Judge, you mention all the paperwork—how can we streamline this aspect of the Commission's work? Can we reduce the bureaucracy of the judiciary? As a practicing judge and from your experience how can we make more efficient America's judicial procedures? Is our system becoming overburdened now?

Judge **Wilkins**. You know in the Sentencing Act and this implementation I was talking about, a form was developed by the Administrative Office of the Courts. It's about a 5-page form and the judges have to fill it out when they send in all of this other stuff to us. Well, they aren't filling it out. I said, "Why don't you fill it out?" They said, "It's too much trouble. We are just not going to do it," and we were getting about 27 percent compliance rate with all the judges around the country because they said it's too much, and so we have developed now a form that is one page and it takes about 18 seconds to fill out. It's just a check block, and that thing is now coming in with great regularity.

Senator **Rudman**. What kind of compliance are you getting on that?

Judge **Wilkins**. Well, it's just starting. It's jumped to well over 50 percent in the first month. Everybody tries to comply and do it but you can just get overburdened. Some of the legislation being introduced on habeas corpus reform now that I know you are familiar with, those are some of the things we see in the courts now and the appellate courts that the cases keep going up and down the line and up and down the line, and it's not so much any judge's fault I don't think as every judge is trying to be conscientious in making sure that a defendant's rights as provided by statute are fully protected. So we need a streamline there in our judicial system.

I think too, it all depends on the individual judge. In the eastern district of Virginia they have a rocket docket they call it. Everybody complains about it. All the lawyers complain about it because you file a case and within about 45 days you are going to have a trial. That is swift justice; that is good justice, but then on the other side, the crowd is complaining about that. In South Carolina we have a very current docket.

Senator HOLLINGS. We do have a current docket here?

Judge WILKINS. Yes, sir; and it's just because of the judges who are willing to do what is necessary to keep the caseload moving.

Senator RUDMAN. The places we don't have current dockets, of course, are places with incredible crime rates, such as Miami, and other places in the country where the dockets are so full of criminal cases that civil cases can't get heard. We are going to try to address that issue, as well as the habeas issue in this year's package creating new Federal judgeships to see whether or not there can be some limitation and yet preservation of rights and so forth. As you know, there have been a number of groups studying that and I expect we will be getting at that as early as several weeks from now when we take up the new crime bill.

Senator HOLLINGS. Your idea is right to the point on deportation of a first offender courier, or mule. It is an excellent suggestion and we will look at including that in the crime bill which is coming up here in the next week or the following week. You have been of wonderful assistance to the subcommittee, judge, and we are privileged to have you appear here this morning. We thank you very much.

Senator RUDMAN. Thank you very much, Judge Wilkins, and thank you for all you are doing for the Commission. It's very important work.

DEPARTMENT OF JUSTICE

STATEMENT OF E. BART DANIEL, U.S. ATTORNEY, DISTRICT OF SOUTH CAROLINA, U.S. DEPARTMENT OF JUSTICE

Senator HOLLINGS. Next we have a panel of Federal law enforcement officials. They are Mr. Bart Daniel, our U.S. attorney; Mr. Fred Verinder, the special agent in charge of the Federal Bureau of Investigation in South Carolina; Tony Acri, of the Atlanta DEA field office; and Jim McGivney, of the DEA's Columbia office; and Ms. Lydia Glover, our U.S. marshal. It's been suggested you try to limit your statements to 5 minutes. Of course, your entire statement will be included in the record, and then we will proceed with questions. Mr. District Attorney, we welcome you and we will be glad to hear from you at this time.

Mr. DANIEL. Thank you, Senator Hollings. Mr. Chairman, Senator Rudman, on July 9, 1989, Federal and State agents seized $405,000 in cash, nine parcels of real property, 33 illegal weapons, and 20 vehicles. The Government charged 12 defendants with trafficking in crack cocaine. On July 19, 1989, some 10 days later, FBI agents seized over 1,100 pounds of uncut cocaine, $670,000 in cash, a $500,000 home with no mortgage, and a $200,000 sailing yacht. The Government charged nine defendants with importing over 1 ton of cocaine over an 18-month period.

These two cases, Senator, just 10 days and less than 100 miles apart, did not take place in Los Angeles, Detroit, or Miami. They took place right here in our own backyard in Beaufort and Orangeburg Counties. These are examples, Senators, of the drug problem in South Carolina, and I suspect of the drug problem nationwide. But they also show what is possible when we have a team of law enforcement working together in a district and aggressively pursuing drug traffickers, because there can be no dispute, aggressive law enforcement is a strong deterrent to drug criminals.

By way of example, for several years after our successful Operation Jackpot in South Carolina in which we infiltrated and penetrated the drug kingpins who were so well insulated, they avoided South Carolina for a number of years, 3 or 4 years at least, thereafter for fear of detection, zealous prosecution, and long prison sentences.

It is clear, certainly to those of us testifying today, that we must have a combined, a cooperative, and a concentrated team effort in law enforcement among State, Federal, and local law enforcement agencies in order to fight this war, and we can use whatever words we want, but we know it is a war.

In the past, unfortunately, we have been outspent, outmanned, and at times unfortunately outgunned, but that is about to change thanks to this subcommittee. It appears help is on the way and we will have additional new Federal prosecutors in South Carolina to help to zealously prosecute these drug kingpins, because the numbers are getting astounding.

In discussing the nature of the problems, I will give you a brief outline and let you know what we have done here in little old South Carolina to combat that problem or to address the problem. For many years in South Carolina, as across the Nation, law enforcement has had too few resources with too many cases. It's that simple. By way of example, in the *Orangeburg Crack Cocaine* case, we had to seek help from the Governor's RAID team in order to ambush the drug dealers when they had their assets and their money in one place. By carefully planning the case and conducting the raid early on a Sunday morning and putting off the raid several times, we were able to seize $405,000 in cash along with all the other property. And that was the cooperative team effort.

In the *Hilton Head Cocaine* case, we had three separate title III wiretaps. We had video and we had audio surveillance. It has been without a doubt the most technically sophisticated case we have seen in the district of South Carolina. Prior to this case we have had only five wiretaps in the history of the district. You can count them on one hand.

Senator RUDMAN. Only five for all cases or for drug cases?

Mr. DANIEL. For all cases in Federal prosecution, Senator, which is astounding. Since that time I can promise you at least now you can hold up two hands, and that is since May. But, as you know, these cases require great legal support by experienced Federal prosecutors. We at the U.S. Attorney's Office are dedicated to provide that support and, in fact, have been providing that support in an aggressive fashion.

As U.S. attorney I personally worked on the *Hilton Head* case every day while it was getting ready to go down and thereafter during the trial, but due to the extensive nature of the wiretaps, we had to use assistant U.S. attorneys from Greenville, Charleston, as well as Columbia to work on the case to lend a hand because we didn't have enough expertise, we just hadn't done enough of them. There were three of them, one from each city and we got together and basically walked it through and worked very closely obviously with Fred Verinder's office and people with the Federal Bureau of Investigation in Washington as well as the Department of Justice. We were all provided—and I know Mr. Verinder will tell you this—great support both from the Department from the Attorney General's standpoint and from the Federal Bureau of Investigation.

Senator HOLLINGS. I would say on that point, Mr. District Attorney, that prior to your taking over, I think for 18 months there wasn't a single case in Charleston, Beaufort, or Horry County, and down at Myrtle Beach or anywhere else. We had the least amount of seizures and prosecutions, and as a result where this subcommittee provided funding for 940 additional U.S. assistant attorneys in the 1989 act, South Carolina was only assigned 4, I think the same amount as North Dakota, because we didn't have any significant drug activities. Now you have helped us, Senator Rudman and I, repair that and we have got it corrected to where you now will be assigned 18 attorney and support positions. When are you going to get them, do you know?

Mr. DANIEL. Senator, I am pleased to say we should be getting them soon. As you know, there is a lead time from the time you begin to actually hire from the time the Attorney General makes the appointment for an assistant U.S. attorney position. Until that person is on board there is obviously a lengthy and thorough background check. So it will be another 3 months before we would actually get those people on board.

Senator HOLLINGS. Go right ahead with your statement. I didn't mean to interrupt.

Mr. DANIEL. Senator, that is greatly appreciated and I think it's going to make a very positive impact because just with the two new attorney positions that you helped us get when I first started in May, it's had a very positive impact and we are getting experienced prosecutors but also people who are aggressive and who will pursue some real cases rather than just the relatively easy cases.

Due to the extensive nature of the wiretaps in that *Hilton Head* case, we had to have everyone work together. The lead defendant in the case was extradicted from Switzerland. He is a Colombian National from Medellin, Colombia and he was represented by F. Lee Bailey. There were lawyers in that case from Miami, lawyers from Washington, DC, and they were some of the best, most noted criminal defense lawyers in the country. Bob Bickerton, the assistant U.S. attorney, and I prosecuted the case. The trial lasted about 3 weeks.

Bob Bickerton, as assistant U.S. attorney, spent more than 300 hours alone working during the month of July just preparing the case for trial, because you had so many good lawyers on the other side. That is really the problem we are facing, is that there is so much money on the other side that we are oftentimes outspent. We are not outhustled or not outworked, but many times outspent.

I am pleased to tell you that after a 3-week trial before Judge Sol Blatt the jury came back with guilty verdicts on every single charge they considered, and just as interestingly, after a 3-week trial they came back in about 85 minutes with those guilty verdicts. Each of these defendants has been convicted now and because of the Federal sentencing guidelines, faces up to life without parole in the judge's discretion. The minimum sentence for each of these defendants is somewhere around 14 to 15 years without the benefit of parole.

The Federal system really has gotten to be what you see is what you get. We really do have truth in sentencing in Federal court today. But that has been our problem. Despite the past critical shortages of manpower, support, and resources our law enforcement team has been tracking down, arresting, and zealously prosecuting the kingpins of the drug underworld.

Just as importantly, we are seizing and forfeiting their drug assets at a record pace. Our asset forfeiture program in South Carolina, as well as the rest of the country, is the most cost-effective program in the United States. So we see what the problem is. What we really have to do now is to decide how we are going to combat that problem, what action we are going to take.

We have been taking seven steps at the U.S. Attorney's Office to help promote cooperative law enforcement and zealously prosecute drug cases. Some of those steps are more radical than others. Some are simple steps, such as encouraging law enforcement to work together, something that sounds so easy but, as you all know, isn't always the case.

The first thing we have done is we have restructured the U.S. Attorney's Office to put the manpower where the criminal cases are. One of the criticisms the Department of Justice had with our office in South Carolina some 18 months ago or 2 years ago was that we had an equal number of civil assistant U.S. attorneys as we had criminal assistant U.S. attorneys. We were one of the few districts of the 93 districts in the country that had an equivalent number. The top priority of the Department of Justice and the President, and everyone in this country, seems to be, and is, fighting the war on drugs, and, yet, we had most of or at least one-half of our resources at the U.S. Attorney's Office in South Carolina focused on civil cases.

We are doubling our prosecutors in Charleston from two Federal prosecutors to four Federal prosecutors. We very shortly hope to do the same in Greenville, and Senator Hollings with your announcement of the 18 new positions, that would be 7 attorney positions and 11 support positions. We will be able to double our prosecution effort in Greenville as we are doing in Charleston, and in addition to adding to other places.

We also hope to assign a new Federal prosecutor to the Florence office. We don't have a man in the Florence office now, and that is incredible when you think of all the drug activity up and down the coast in that area, in the Myrtle Beach area and Pee Dee. So, we hope to man that Florence office.

Second, in addition to restructuring our office and reallocating our resources, I have petitioned Chief Federal Judge Sol Blatt, Jr., to impound new Federal grand juries in Charleston and Greenville so that we can better investigate, prosecute, and track down the insulated kingpins while seizing and forfeiting their drug assets.

The new Federal grand jury in Charleston will be meeting interestingly enough at the Hollings Judicial Center tomorrow morning at ~~10~~ a.m. for it's very first meeting. We expect the Federal grand jury in Greenville to be up and running before summer's end. So in addition to impaneling of those grand juries, we have rejuvenated the drug task force program in South Carolina. That is the organized crime drug enforcement task force.

Since May, we have put Robert Jendron, our most experienced drug prosecutor who worked with us in the *Operation Jackpot Drug* case, we have placed him as lead task force attorney and freed him up from all the other administrative duties that he used to have so he can be a lawyer and do what assistant U.S. attorneys are supposed to do, which is to prosecute criminal cases.

Since that time we have indicted 40 drugs traffickers, seized over $500,000 in cash, 27 vehicles have been seized, 50 illegal weapons have been seized, and 16 parcels of real property valued in excess of $1.5 million. We now have active drug task forces. I can say this with confidence and certainty, we now have active drug task forces in Columbia, Greenville, and Charleston, and never before have we worked any better with local law enforcement and our State law enforcement division [SLED].

The fourth step that we have taken is to create an asset forfeiture unit. Of course we were able to do that because this subcommittee and Congress gave us the positions, the money to do that. Due to the astounding success of our asset forfeiture program in South Carolina, with those positions we will add an additional Federal prosecutor to the asset forfeiture unit.

Senator HOLLINGS. Are you getting personnel with that money as well as equipment? I notice you got a helicopter, and now you are going to get personnel also?

Mr. DANIEL. I am not sure if we will be getting personnel, Senator, but we have been getting plenty of equipment. The nice thing is we shared $3.5 million with the State law enforcement division with Chief Robert Stewart's outfit, and we shared some money with Charleston County. Robert Stewart showed me a picture, I thought he was a proud daddy the other day when he showed me a picture of the new helicopter they bought with the $1.67 million we had given them. So it's a big help and something all law enforcement here, as well as the State and local law enforcement, can use.

Senator HOLLINGS. You can thank Senator Rudman and the subcommittee because the seizure forfeiture provision expired and we included the legislation in our appropriations bill, keeping the program alive.

Senator RUDMAN. I just hope we don't see up here what I am worried that we are seeing in some places. All the agents are traveling around in Porsches and Ferraris. You let me know if you do that.

Mr. DANIEL. That is the way to make an agent your best friend, I can promise you that. We are seizing and forfeiting drug assets at a record pace. In all of 1988 we forfeited in the district of South Carolina just $26,000 in drug-related assets. It was the official statistic from the Department of Justice. Since May, we have seized over $7 million in drug-related assets. As I mentioned earlier, we shared $3.5 million in drug assets with SLED and Beaufort County and Charleston County, and we are getting ready to share assets with the Orangeburg County Sheriff's Department.

The fifth thing we have done is to promote teamwork among State, local, and Federal law enforcement. Because of the critical shortages in law enforcement, we are working together and sharing resources as never before. I tell you now that the *Orangeburg Crack Cocaine* case was the most intensive team oriented effort that South Carolina has ever known. Federal and State agents from almost every law enforcement agency in the State, including Governor Campbell's RAID team, worked on the case. We are working together now better than we ever have before, and I can say that unequivocably because as a former assistant U.S. attorney we worked closely back then too with State and local law enforcement. Simply put, we have no choice.

We are now employing more aggressive law enforcement techniques than we have ever employed. South Carolina is fortunate to have two leaders in law enforcement. One is seated next to me, Mr. Fred Verinder, special agent in charge of the Columbia FBI office, which has the entire district of South Carolina, and the second is Chief Robert Stewart, who is our chief with the State law enforcement division. Through the leadership of these law enforcement men we are having an aggressive approach to law enforcement today in South Carolina, but also people who are willing to work together as teammates and not as one team while one member tried to pull in one direction and someone tried to pull in the other direction.

I can say that Chief Robert Stewart, because I worked with him while I was assistant U.S. attorney, has had a dramatic impact on law enforcement in South Carolina since he has become chief. We are attempting, and we are actually being successful, to aggressively use sophisticated techniques. The solicitors, the State and local police can handle the people they arrest on the street. It doesn't take the sophisticated long-term grand jury investigation that we have the capabilities to do in the Federal system as Senator Hollings has mentioned before, but we must be patient and we must work hard and we must be aggressive, something we have not been as good at in the past as we probably should have.

By way of example, in that Hilton Head operation alone we employed three separate title III wiretaps. We recently obtained convictions in a Greenville drug task force case where title III wiretaps were extensively used. The success of this aggressive tactic speaks for itself.

Finally, thanks to you Senator Hollings, Senator Rudman, and this subcommittee and many other Members of Congress, we now have restored the equitable sharing program which gives us the capability to legally share some of the drug dealer's money and assets with local law enforcement to be turned back into law enforcement and turned against the drug dealers themselves.

I have had the pleasure of distributing, as U.S. attorney, because of joint investigations with Federal, State, and local law enforcement, checks over $3.5 million to Beaufort, Orangeburg, and other local law enforcement, and the beautiful thing about it is in Charleston they are building an entire new training facility, Senator Hollings, to help their drug agents work on drug cases so they will be better at it. So, I think we are seeing some positive impacts from our Federal equitable sharing programs.

In conclusion, thank you, Senator Hollings and Senator Rudman, and thanks to the President, as well as Senator Thurmond. We now have additional Federal prosecutors on their way to aggressively pursue the major drug traffickers and to deprive them of the ill-gotten gain by forfeiting their assets forever.

In closing I pledge today that we will continue to lead the Nation with our drug task force program and our asset forfeiture unit. I thank you, Senator Hollings, and this subcommittee for your strong support. We can, we must, and I tell you now I sincerely believe we will make a difference.

PREPARED STATEMENT

Senator HOLLINGS. Very good. We will place your statement in the record at this point.

[The statement follows:]

STATEMENT OF E. BART DANIEL

I. INTRODUCTION

MR. CHAIRMAN, AND MEMBERS OF THE SENATE APPROPRIATIONS COMMITTEE:

ON JULY 9, 1989, FEDERAL AND STATE AGENTS SEIZED $405,000.00 IN CASH, NINE PARCELS OF REAL PROPERTY, 33 ILLEGAL WEAPONS AND 20 VEHICLES. THE GOVERNMENT CHARGED TWELVE DEFENDANTS WITH TRAFFICKING IN CRACK COCAINE.

ON JULY 19, 1989, SOME TEN DAYS LATER, FBI AGENTS SEIZED OVER 1,100 POUNDS OF UNCUT COCAINE, $670,000.00 IN CASH, A $500,000.00 HOME AND A $200,000.00 SAILING YACHT. THE GOVERNMENT CHARGED 9 DEFENDANTS WITH IMPORTING AND DISTRIBUTING OVER 1 TON OF PURE COCAINE.

THESE TWO CASES, JUST TEN DAYS AND 100 MILES APART, DID NOT TAKE PLACE IN MIAMI, LOS ANGELES OR DETROIT. AGENTS MADE THESE CASES RIGHT HERE IN OUR OWN BACK YARD - ORANGEBURG AND BEAUFORT COUNTIES.

THESE ARE EXAMPLES OF THE DRUG PROBLEM IN S.C. BUT THEY ALSO SHOW WHAT IS POSSIBLE WHEN WE HAVE AN AGGRESSIVE TEAM ORIENTED EFFORT. THERE IS NO DISPUTE. AGGRESSIVE LAW ENFORCEMENT IS A STRONG DETERRENT TO DRUG CRIMINALS. FOR SEVERAL YEARS AFTER OUR SUCCESSFUL OPERATION JACKPOT, DRUG KINGPINS AVOIDED SOUTH CAROLINA FOR FEAR OF DETECTION, ZEALOUS PROSECUTION AND LONG PRISON SENTENCES.

IT IS CLEAR THAT WE MUST HAVE A COMBINED, CONCENTRATED

AND COOPERATIVE TEAM EFFORT AMONG STATE, FEDERAL AND LOCAL LAW ENFORCEMENT TO FIGHT THIS WAR. AND MAKE NO MISTAKE - IT IS A WAR. OUR SOLDIERS ARE READY, OUR BATTLE PLANS ARE DRAWN. IN THE PAST, WE HAVE BEEN OUTMANNED, OUTSPENT AND YES, OUTGUNNED. BUT, THANKS TO THE PRESIDENT, THIS COMMITTEE AND THE AMERICAN PEOPLE, THE TIDE IS TURNING. HELP IS ON THE WAY.

II. NATURE OF THE PROBLEM

1. FOR MANY YEARS, LAW ENFORCEMENT HAS HAD TOO MANY CASES WITH TOO FEW RESOURCES.

A. IN THE ORANGEBURG CASE WE HAD TO SEEK HELP FROM GOVERNOR CARROLL CAMPBELL WITH HIS GOVERNOR'S RAID TEAM IN ORDER TO AMBUSH THE DRUG DEALERS WHEN THEY HAD THEIR MONEY AND ASSETS IN ONE PLACE.

B. IN THE HILTON HEAD COCAINE CASE, WE HAD THREE SEPARATE TITLE III WIRETAPS, VIDEO AND AUDIO SURVEILLANCE. IT HAS BEEN THE MOST TECHNICALLY SOPHISTICATED CASE THAT SOUTH CAROLINA HAS EVER SEEN. AS YOU KNOW, SUCH CASES REQUIRE GREAT LEGAL SUPPORT BY EXPERIENCED PROSECUTORS. WE HAVE PROVIDED THAT SUPPORT. AS U.S. ATTORNEY, I PERSONALLY WORKED ON THE CASE ALMOST EVERY DAY SINCE IT BEGAN. DUE TO THE EXTENSIVE NATURE OF THE WIRETAPS, WE HAD AUSAS FROM GREENVILLE, COLUMBIA AND CHARLESTON LENDING A HAND. THE LEAD DEFENDANT, EXTRADITED FROM SWITZERLAND, WAS REPRESENTED BY NOTED CRIMINAL DEFENSE ATTORNEY F. LEE BAILEY. I PERSONALLY PROSECUTED THE CASE WITH ASSISTANT U.S. ATTORNEY BOB BICKERTON WHO WORKED OVER 300 HOURS DURING THE MONTH OF JULY ALONE. I AM PLEASED TO REPORT THAT AFTER A THREE WEEK TRIAL THE JURY RETURNED VERDICTS OF GUILTY ON ALL OF CHARGES THAT THEY CONSIDERED.

That, Members of the Committee, has been the problem. Somehow, despite the past critical shortages of manpower, support and resources, our law enforcement team has been tracking down, arresting and zealously prosecuting the kingpins of the drug underworld. We are also seizing and forfeiting their drug assets at a record pace. Our Asset Forfeiture Program is the most cost effective program in the United States today.

II. ACTION TAKEN

We have been taking steps to more effectively utilize our limited resources.

1. Restructure U.S. Attorney's Office. Since May 1st we have shifted our prosecutive resources at the U.S. Attorney's Office to areas where they can be most productive.

A. We are doubling our prosecutors in Charleston from two to four. Very shortly we'll be doing the same in Greenville.

B. We hope to assign a prosecutor to our Florence office to combat the increasing drug activity in the Pee Dee.

2. Empanel New Grand Juries. I have petitioned the Chief Federal Judge Sol Blatt, Jr. to impanel new federal grand juries in Charleston and Greenville so that we can better investigate, track down and prosecute the well insulated drug kingpins, while seizing and forfeiting their drug assets. The new federal grand jury in Charleston will meet for the first time tomorrow morning at the Hollings Judicial Center. Our federal grand jury in Greenville should

BE OFF AND RUNNING BY SUMMER'S END. THIS WILL DOUBLE OUR INVESTIGATIVE CAPABILITY IN THE DISTRICT OF SOUTH CAROLINA.

3. REJUVENATE DRUG TASK FORCE. SINCE MAY WE HAVE PLACED A HEAVY EMPHASIS ON OUR DRUG TASK FORCE WHERE WE HAVE ASSIGNED AS LEAD TASK FORCE ATTORNEY ROBERT C. JENDRON, JR. OUR MOST EXPERIENCED DRUG PROSECUTOR. SINCE THIS ADDED EMPHASIS, WE HAVE INDICTED 40 DRUG TRAFFICKERS; SEIZED OVER 1/2 MILLION DOLLARS IN CASH, 27 VEHICLES, 50 ILLEGAL WEAPONS AND 16 PARCELS OF REAL PROPERTY WORTH OVER 1.5 MILLION DOLLARS.

WE NOW HAVE ACTIVE DRUG TASK FORCES IN CHARLESTON, GREENVILLE AND COLUMBIA WITH FULL PARTICIPATION FROM SLED AND OUR LOCAL POLICE DEPARTMENTS.

4. CREATION OF ASSET FORFEITURE UNIT. WE HAVE CREATED AN ASSET FORFEITURE UNIT AND BECAUSE OF ITS ASTOUNDING SUCCESS, WILL BE ADDING AN ADDITIONAL ATTORNEY WITHIN THE NEXT FEW MONTHS. NATIONALLY, WE HAVE GONE FROM THE BOTTOM IN ASSET FORFEITURES TO THE VERY TOP IN NINE SHORT MONTHS. MUCH OF THIS CREDIT IS DIRECTLY ATTRIBUTABLE TO AUSA DOUG BARNETT AND HIS SUPPORT STAFF. WE ARE SEIZING AND FORFEITING DRUG ASSETS AT A RECORD PACE. IN ALL OF 1988 WE SEIZED AND FORFEITED ONLY $26,000 IN DRUG ASSETS. SINCE MAY 1ST WE HAVE SEIZED OVER 7 MILLION DOLLARS IN DRUG RELATED ASSETS.

5. PROMOTE TEAMWORK AMONG STATE, LOCAL AND FEDERAL LAW ENFORCEMENT. BECAUSE OF THE CRITICAL SHORTAGES IN LAW ENFORCEMENT, WE ARE WORKING TOGETHER AND SHARING RESOURCES AS NEVER BEFORE. I TELL YOU WITH PRIDE THAT THE ORANGEBURG CRACK COCAINE CASE WAS THE MOST EXTENSIVE TEAM EFFORT SOUTH CAROLINA

HAS EVER KNOWN. FEDERAL AND STATE AGENTS FROM ALMOST EVERY LAW ENFORCEMENT AGENCY IN THE STATE, INCLUDING GOVERNOR CAMPBELL'S RAID TEAM, WORKED THE CASE. WE ARE WORKING TOGETHER NOW BETTER THAN EVER. SIMPLY PUT, WE HAVE NO CHOICE.

6. EMPLOY SOPHISTICATED AND AGGRESSIVE LAW ENFORCEMENT TACTICS AND TOOLS. SOUTH CAROLINA IS FORTUNATE TO HAVE ONE OF THE MOST OUTSTANDING AND AGGRESSIVE FBI SAC'S IN THE COUNTRY, S.A. FRED VERINDER. TOGETHER WE HAVE FORMED AN AGGRESSIVE TEAM AND WE BOTH ENCOURAGE THE SOPHISTICATED INVESTIGATION OF DRUG TRAFFICKERS. BY WAY OF ILLUSTRATION, THE NUMBER OF TITLE III WIRETAPS IN SOUTH CAROLINA PRIOR TO MAY 1ST COULD BE COUNTED ON ONE HAND. IN THE HILTON HEAD OPERATION ALONE, WE EMPLOYED THREE SEPARATE TITLE III WIRETAPS. WE RECENTLY OBTAINED CONVICTIONS IN A GREENVILLE DRUG TASK FORCE CASE WHERE TITLE III WIRETAPS WERE USED EXTENSIVELY. THE SUCCESS OF THIS TACTIC SPEAKS FOR ITSELF.

7. PROMOTE EQUITABLE SHARING. SINCE MAY 1ST, THANKS TO SENATOR HOLLINGS, SENATOR THURMOND AND OTHER MEMBERS OF CONGRESS, WE HAVE BEEN AUTHORIZED TO SHARE OUR SEIZED ASSETS WITH LOCAL LAW ENFORCEMENT. I HAVE DISTRIBUTED CHECKS FROM JOINT INVESTIGATIONS OF FEDERAL, STATE AND LOCAL OFFICIALS. THIS INCLUDES OVER 3.5 MILLION DOLLARS TO SLED, BEAUFORT COUNTY AND CHARLESTON POLICE DEPARTMENTS TO BE USED FOR DRUG LAW ENFORCEMENT.

IV. RESOURCES

THANKS TO YOU SENATOR HOLLINGS AND YOUR COMMITTEE, AS WELL AS THE PRESIDENT AND SENATOR THURMOND, WE NOW HAVE ADDITIONAL FEDERAL PROSECUTORS ON THE WAY TO HELP AGGRESSIVELY

PURSUE DRUG TRAFFICKERS AND SEIZED THEIR ILL-GOTTEN GAINS. IN CLOSING, I PLEDGE TODAY THAT WE WILL CONTINUE TO LEAD THE COUNTRY WITH OUR DRUG TASK FORCE PROGRAM AND OUR ASSET FORFEITURE UNIT.

I THANK YOU SENATOR HOLLINGS AND THIS COMMITTEE FOR YOUR STRONG SUPPORT. WE CAN, WE MUST AND I TELL YOU NOW WE WILL MAKE A DIFFERENCE.

I WILL BE PLEASED TO ANSWER ANY QUESTIONS AT THIS TIME.

STATEMENT OF FREDERICK B. VERINDER, SPECIAL AGENT IN CHARGE, SOUTH CAROLINA, FEDERAL BUREAU OF INVESTIGATION, DEPARTMENT OF JUSTICE

Senator HOLLINGS. Mr. Verinder.

Mr. VERINDER. Mr. Chairman, Senator Rudman, we appreciate the opportunity to appear before you today and provide testimony concerning the FBI's efforts in the drug problem here in South Carolina. As a special agent in charge of the FBI for South Carolina I am responsible for identifying and addressing the crime problems across the State and, therefore, believe I am in a position to give you an accurate assessment of the seriousness of the drug problem. I can tell you that drugs are the No. 1 problem in this State.

Upon my arrival in 1988, I intensified our efforts in the drug program. I emphasized such areas as expanding informant coverage, a broadened intelligence base, greater cooperation between all law enforcement entities, the need for undercover operations and to utilize the electronic surveillance technique whenever possible. While the electronic surveillance is intrusive, before a Federal judge will approve an application for its use, the FBI must meet very stringent requirements, including a show of probable cause that evidence of criminal activity will be uncovered.

Also, I emphasize the absolute need to concentrate on the seizure and forfeiture of the ill-gotten gains of these drug organizations. As an example of our success in this area, in 1988 we turned over to the U.S. Marshals Service for disposal, assets of $273,000. However, in 1989 we turned over $1.9 million, and in fiscal year 1990 already we are at a clip of $600,000 which it is projected will equal $2.5 million.

It is well documented that South Carolina has been used by major distribution networks as a significant importation and transshipment site for illegal drugs. In October 1988 a plane loaded with 708 pounds of cocaine was seized at the Anderson, SC, airport. The identification of the Americans involved in the transportation of this cocaine from Colombia, South America was made through a 2-year FBI undercover operation entitled CAT-COM.

We have discovered that Greenville, SC, is the focal point of a large-scale drug trafficking organization that operates in New York City, Boston, and Chicago. These organizations, dealing both in cocaine and heroin, were headed and staffed by individuals from the Greenville area who knew each other from childhood. One of the organizations is presently awaiting trial in Chicago. This organization has intimate ties to the El Rukin gang of Chicago.

I can tell you, in my early years in New York City, when I was working the streets, I used to hear the name Greenville boys and never knew what the Greenville boys were until I was assigned to South Carolina, and it's the connection through childhood of the individuals who once resided in Greenville, SC.

In November 1988 four significant members of these organizations were convicted in the U.S. district court in Greenville, SC, on heroin and cocaine trafficking charges. Testimony at this trial revealed that these individuals moved more than 200 pounds of heroin during a 2-year period from the Los Angeles area through its Greenville, SC, connection to New York and other major cities.

On April 26, 1989, an FBI court-ordered electronic surveillance was initiated in Greenville, SC, which continued for 60 days. On January 26, 1990, just last month, after a trial lasting 3 weeks, five individuals were convicted in the U.S. district court in Greenville on conspiracy to traffic in cocaine. In addition, one other individual pled guilty and testified in this matter.

Testimony during this trial indicated that this group was buying cocaine in multikilogram quantities from a supplier in Miami, FL, which was then moving it to Greenville where it was distributed throughout the upstate and in North Carolina and Tennessee. The cocaine was of such high quality that the DEA chemist claimed it was 97 percent pure which was the highest she had ever tested. The main defendant in this case faces a life sentence. This matter was worked jointly with the Greenville Police Department, Greenville County Sheriff's Office, SLED, DEA, IRS and, of course, the U.S. Attorney's Office who is so supportive.

On March 4, 1989, an individual approached a very aggressive and experienced agent of our Beaufort, SC, resident agency and provided information concerning a possible cocaine smuggling organization on Hilton Head Island. These facts alone, of course, would not have been enough to conduct a successful investigation; however, the agent's knowledge in drug investigations convinced this individual to further participate in the investigation which ultimately led to the largest seizure of cocaine in the history of South Carolina, 1,069 pounds, as well as the arrest of 11 subjects, 4 of them Colombian Nationals. Most importantly, a major drug organization was dismantled.

This individual's cooperation was not on the fringes, but rather a total commitment to actively participate in the war on drugs. He said to me you can't be passive about drugs. That attitude set in motion a storybook tale of a sailing cruise by this individual and the American drug smugglers through the Caribbean to the peaceful island of Bonaire, where the Colombians delivered in broad daylight 502 kilograms of cocaine to the 470 foot sailboat they were using.

Because of this citizen's courage and ingenuity, the FBI was able to set up a sophisticated network of electronic equipment, to include closed circuit TV, wiretaps, hidden microphones at three houses on Hilton Head Island, SC, where the cocaine was offloaded in broad daylight and eventually delivered back to the Colombian network for distribution. The story didn't end at Hilton Head when the cocaine was seized and eight individuals were arrested, but continued to Rome, Switzerland, eventually leading to the arrest by foreign police in Geneva of the Colombian mastermind behind the cocaine transportation network. This case also resulted in the forfeiture to the Government of ill-gotten gain of $1.7 million. This successful investigation was culminated by all efforts of FBI, DEA, Customs, Coast Guard, U.S. Marshals Service, and Beaufort County Sheriff's Office.

We are fortunate in South Carolina, Senators, to have a very aggressive U.S. attorney who pursues prosecution of drug matters. We would not have had the successes without his fine offices. We are fortunate to have a Federal court system that is responsive to the drug problems in South Carolina. Through the U.S. marshal who has a can-do attitude, to DEA who is always there when called upon, to SLED and the highway patrol, our full partners in all of our investigations.

To insure FBI South Carolina is concentrating it's resources on the most significant drug problems in the State, I have implemented two things, one, the drug intelligence system, which is a computer data base established to serve as repository for drug intelligence information received in the State of South Carolina from any and all sources, Federal, State, county, local enforcement entities, informants, and the general public. This intelligence will be continually cross-referenced and analyzed in order to target the most sophisticated drug organization. The information will also be shared with the local authorities to either independently or jointly address the drug problem.

We have also implemented the Southeast drug strategy, a copy of what they were doing in the Southwest. The essence of this strategy is for the nearby offices to compare notes and insure we target the biggest and most sophisticated organizations. The FBI's efforts must be directed toward sophisticated detailed long-term investigations where success equals the removal of an entire network of the organization and not the removal of easily replaceable links with the organization or the seizure of replenishable drugs.

The FBI has an important role in the drug war and with the support of Congress and the administration and the American public, we will continue to play an important role. That concludes my prepared statement.

PREPARED STATEMENT

Senator HOLLINGS. Thank you, sir. We will insert your statement in the record.

[The statement follows:]

STATEMENT OF FREDERICK B. VERINDER

MR. CHAIRMAN, AND OTHER DISTINGUISHED MEMBERS OF THE COMMITTEE: I APPRECIATE THE OPPORTUNITY TO APPEAR BEFORE YOU TODAY TO PROVIDE TESTIMONY CONCERNING THE FBI'S EFFORTS IN COMBATING THE DRUG PROBLEM HERE IN SOUTH CAROLINA. AS THE SPECIAL AGENT IN CHARGE FOR THE STATE OF SOUTH CAROLINA, I AM RESPONSIBLE FOR IDENTIFYING AND ADDRESSING THE CRIME PROBLEMS ACROSS THE STATE AND THEREFORE BELIEVE I AM IN A POSITION TO GIVE YOU AN ACCURATE ASSESSMENT OF THE SERIOUSNESS OF THE DRUG PROBLEM. THIS ASSESSMENT CLEARLY REVEALS DRUGS AS OUR NUMBER ONE CRIME PROBLEM.

SOUTH CAROLINA HAS A VERY SERIOUS DRUG PROBLEM AS DOES THE REST OF THE NATION. THE DRUG PROBLEM BEING FOUGHT BY LAW ENFORCEMENT IN SOUTH CAROLINA IS ON TWO FRONTS. FIRST, OUR EFFORTS ARE AIMED AT THE DRUG SMUGGLERS WHO USE OUR VAST COASTLINE, PORTS, AND THE MANY REMOTE AREAS OF OUR STATE TO BRING IN THEIR DEADLY ORGANIC PRODUCTS. LARGE QUANTITIES OF DRUGS ARE BEING TRANSPORTED FROM DRUG-PRODUCING NATIONS INTO OUR STATE. THE DRUGS BROUGHT INTO SOUTH CAROLINA BY THESE SMUGGLERS FOR THE MOST PART ARE NOT DESTINED FOR OUR STATE, BUT ARE QUICKLY MOVED TO THE DISTRIBUTING ORGANIZATIONS ALREADY IN PLACE IN CITIES LIKE NEW YORK AND MIAMI. WHY THEN IS THIS A PROBLEM IN SOUTH CAROLINA? BECAUSE IT TRIGGERS VIOLENT CRIMES SUCH AS MURDER, EXTORTION, AND CORRUPTION OF POLICE AND PUBLIC OFFICIALS ALL AS A RESULT OF THE HUGE PROFITS DRUG ACTIVITIES GENERATE.

ON THE OTHER FRONT, SOUTH CAROLINA IS NO DIFFERENT THAN ANY OTHER PLACE IN AMERICA, WHERE DRUG USE IS THREATENING THE VERY FABRIC OF OUR STATE AND OUR COUNTRY. LAW ENFORCEMENT HERE IS FIGHTING THE DRUG ORGANIZATIONS WHICH ARE PEDDLING THEIR POISON TO DRUG USERS AND OUR GREATEST RESOURCE--OUR CHILDREN.

WHAT IS THE FBI'S ROLE IN THIS WAR?

ON JANUARY 28, 1982, THEN-ATTORNEY GENERAL WILLIAM FRENCH SMITH ISSUED AN ORDER DELEGATING TO THE FBI CONCURRENT JURISDICTION FOR INVESTIGATING FEDERAL DRUG VIOLATIONS. THE DECISION TO GRANT DRUG JURISDICTION WAS DUE TO THE FBI'S CUMULATIVE EXPERIENCE IN CONDUCTING LONG-TERM, COMPLEX, SOPHISTICATED AND INNOVATIVE INVESTIGATIONS, INCLUDING THE USE OF ELECTRONIC SURVEILLANCE, UNDERCOVER OPERATIONS, INFORMANTS, AND PHYSICAL SURVEILLANCE.

ON MAY 7, 1986, THE FBI ESTABLISHED ITS NATIONAL DRUG STRATEGY (NDS) WHICH CONCENTRATES OUR LIMITED INVESTIGATIVE RESOURCES ON THE DRUG IMPORTATION AND DISTRIBUTION ORGANIZATIONS DEEMED TO REPRESENT THE GREATEST THREAT TO THE UNITED STATES. THE NDS TARGETS MAJOR, MULTIJURISDICTIONAL, DRUG-TRAFFICKING ORGANIZATIONS THROUGH LONG-TERM, SUSTAINED INVESTIGATIONS WITH

THE INTENTION OF DISMANTLING TRAFFICKING NETWORKS, ARRESTING THEIR LEADERSHIP, AND FORFEITING THEIR ILL-GOTTEN GAINS.

UPON MY ARRIVAL IN OCTOBER 1988, I INTENSIFIED OUR EFFORTS IN THE DRUG PROGRAM. I EMPHASIZED SUCH AREAS AS AN EXPANDED INFORMANT COVERAGE, A BROADENED INTELLIGENCE BASE, GREATER COOPERATION BETWEEN ALL LAW ENFORCEMENT ENTITIES, THE NEED FOR UNDERCOVER OPERATIONS, AND TO UTILIZE THE ELECTRONIC SURVEILLANCE TECHNIQUE WHENEVER POSSIBLE. WHILE THE ELECTRONIC SURVEILLANCE TECHNIQUE IS INTRUSIVE, BEFORE A FEDERAL JUDGE WILL APPROVE AN APPLICATION FOR ITS USE, THE FBI MUST MEET EVERY STRINGENT REQUIREMENT, INCLUDING A SHOW OF PROBABLE CAUSE THAT EVIDENCE OF CRIMINAL ACTIVITY WILL BE UNCOVERED. ALSO, I EMPHASIZED THE ABSOLUTE NECESSITY TO CONCENTRATE ON SEIZURE AND FORFEITURE OF THE ILL-GOTTEN GAINS OF THE INDIVIDUALS INVOLVED IN THE DRUG ORGANIZATIONS. AS AN EXAMPLE OF OUR SUCCESS IN THIS AREA, THE SOUTH CAROLINA FBI SEIZED AND TURNED OVER TO THE UNITED STATES MARSHALS SERVICE FOR DISPOSAL, ASSETS TOTALING $273,197 IN FISCAL YEAR 1988. IN FISCAL YEAR 1989, THIS TOTAL INCREASED TO $1,919,955 AND ALREADY IN FISCAL YEAR 1990, WE HAVE TURNED OVER $596,542 IN ASSETS.

IT IS WELL DOCUMENTED THAT SOUTH CAROLINA HAS BEEN USED BY MAJOR DISTRIBUTION NETWORKS AS A SIGNIFICANT IMPORTATION AND TRANSSHIPMENT SITE FOR ILLEGAL DRUGS. IN OCTOBER 1988, A

PLANE LOADED WITH 708 POUNDS OF COCAINE WAS SEIZED AT THE ANDERSON, SOUTH CAROLINA, AIRPORT. THE IDENTIFICATION OF THE AMERICANS INVOLVED IN THE TRANSPORTATION OF THIS COCAINE FROM COLOMBIA, SOUTH AMERICA, WAS MADE THROUGH A TWO-YEAR FBI MIAMI UNDERCOVER OPERATION CODE-NAMED CAT-COM.

WE HAVE DISCOVERED THAT GREENVILLE, SOUTH CAROLINA, IS THE FOCAL POINT OF LARGE-SCALE DRUG-TRAFFICKING ORGANIZATIONS THAT OPERATE IN NEW YORK CITY, BOSTON, AND CHICAGO. THESE ORGANIZATIONS, DEALING BOTH IN COCAINE AND HEROIN, WERE HEADED AND STAFFED BY INDIVIDUALS FROM THE GREENVILLE AREA WHO KNEW EACH OTHER FROM CHILDHOOD. ONE OF THESE ORGANIZATIONS IS PRESENTLY AWAITING TRIAL IN CHICAGO. THIS ORGANIZATION HAS INTIMATE TIES TO THE EL RUKIN GANG OF CHICAGO.

IN NOVEMBER 1988, FOUR SIGNIFICANT MEMBERS OF THESE ORGANIZATIONS WERE CONVICTED IN UNITED STATES DISTRICT COURT, GREENVILLE, SOUTH CAROLINA, ON HEROIN AND COCAINE-TRAFFICKING CHARGES. TESTIMONY AT THIS TRIAL REVEALED THAT THESE INDIVIDUALS MOVED OVER 200 POUNDS OF HEROIN DURING A TWO-YEAR PERIOD FROM THE LOS ANGELES AREA THROUGH ITS GREENVILLE, SOUTH CAROLINA, CONNECTION TO NEW YORK AND OTHER MAJOR CITIES ON THE EAST COAST.

ON APRIL 26, 1989, AN FBI COURT-ORDERED ELECTRONIC SURVEILLANCE WAS INITIATED IN GREENVILLE, SOUTH CAROLINA, WHICH

CONTINUED FOR 60 DAYS. ON JANUARY 26, 1990 AFTER A TRIAL LASTING THREE WEEKS, FIVE INDIVIDUALS WERE CONVICTED IN UNITED STATES DISTRICT COURT, GREENVILLE, SOUTH CAROLINA, OF CONSPIRACY TO TRAFFIC IN COCAINE. IN ADDITION, ONE OTHER INDIVIDUAL PLED GUILTY AND TESTIFIED IN THIS MATTER.

TESTIMONY DURING THIS TRIAL INDICATED THAT THIS GROUP WAS BUYING COCAINE IN MULTIKILOGRAM QUANTITIES FROM A SUPPLIER IN THE MIAMI, FLORIDA, AREA WHICH WAS BEING TRANSSHIPPED THROUGH ATLANTA, GEORGIA, TO GREENVILLE, WHERE IT WAS BEING DISTRIBUTED THROUGH UPSTATE SOUTH CAROLINA, WESTERN NORTH CAROLINA, AND EASTERN TENNESSEE AS BOTH COCAINE AND CRACK COCAINE. THE COCAINE WAS OF SUCH HIGH QUALITY THAT A DEA CHEMIST TESTIFIED THAT ONE OF THE BATCHES SEIZED DURING THE COURSE OF THE INVESTIGATION WAS 97 PERCENT PURE COCAINE HYDROCHLORIDE WHICH WAS AMONG THE HIGHEST PURITY SHE HAD EVER TESTED. THE MAIN DEFENDANT IN THIS CASE FACES A LIFE SENTENCE. THIS MATTER WAS WORKED JOINTLY WITH GREENVILLE CITY POLICE DEPARTMENT, GREENVILLE COUNTY SHERIFF'S OFFICE, SOUTH CAROLINA LAW ENFORCEMENT DIVISION, DEA, IRS, AND THE UNITED STATES ATTORNEY'S OFFICE.

ON MARCH 4, 1989, AN INDIVIDUAL APPROACHED AN AGGRESSIVE AND EXPERIENCED SPECIAL AGENT IN OUR BEAUFORT RESIDENT AGENCY AND PROVIDED INFORMATION CONCERNING A POSSIBLE COCAINE-SMUGGLING ORGANIZATION ON HILTON HEAD ISLAND, SOUTH CAROLINA.

THESE FACTS ALONE, OF COURSE, WOULD NOT HAVE BEEN ENOUGH TO CONDUCT A SUCCESSFUL INVESTIGATION, HOWEVER, THE AGENT'S KNOWLEDGE IN DRUG INVESTIGATIONS CONVINCED THIS INDIVIDUAL TO FURTHER PARTICIPATE IN THE INVESTIGATION WHICH ULTIMATELY LED TO THE LARGEST SEIZURE OF COCAINE IN THE HISTORY OF SOUTH CAROLINA, 1,069 POUNDS, AS WELL AS THE ARREST OF 11 SUBJECTS, 4 OF THEM COLOMBIAN NATIONALS WHO WERE BROKERING THE COCAINE FOR THE MEDELLIN CARTEL. MOST IMPORTANTLY, A MAJOR DRUG ORGANIZATION WAS DISMANTLED.

THIS INDIVIDUAL'S COOPERATION WAS NOT ON THE FRINGES, BUT RATHER WAS A TOTAL COMMITMENT TO ACTIVELY PARTICIPATE IN THE WAR ON DRUGS. HIS INVOLVEMENT WAS BASED ON HIS BELIEF THAT "YOU CAN'T BE PASSIVE ABOUT DRUGS." THAT ATTITUDE SET IN MOTION A STORYBOOK TALE OF A SAILING CRUISE BY THIS INDIVIDUAL AND THE AMERICAN DRUG SMUGGLERS THROUGH THE CARRIBEAN TO THE PEACEFUL ISLAND OF BONAIRE, WHERE THE COLOMBIANS DELIVERED 502 KILOGRAMS OF COCAINE, OVER 1,100 POUNDS TO THE 47-FOOT BOAT.

BECAUSE OF THIS CITIZEN'S COURAGE AND INGENUITY, THE FBI WAS ABLE TO SET UP A SOPHISTICATED NETWORK OF ELECTRONIC EQUIPMENT TO INCLUDE CCTV, WIRETAPS, AND HIDDEN MICROPHONES AT THREE HOUSES ON HILTON HEAD ISLAND, SOUTH CAROLINA, WHERE THE COCAINE WAS OFF-LOADED AND EVENTUALLY DELIVERED BACK TO THE COLOMBIAN NETWORK FOR DISTRIBUTION. THE STORY DIDN'T END AT

HILTON HEAD ISLAND ON JULY 26, 1989, WHEN THE COCAINE WAS SEIZED AND EIGHT OF THE SUBJECTS WERE ARRESTED BUT CONTINUED TO ROME AND SWITZERLAND, EVENTUALLY LEADING TO THE ARREST BY FOREIGN POLICE IN GENEVA OF THE COLOMBIAN MASTERMIND BEHIND THIS COCAINE TRANSPORTATION NETWORK. THIS CASE ALSO RESULTED IN THE FORFEITURE TO THE GOVERNMENT OF ILL-GOTTEN ASSETS TOTALING OVER 1.7 MILLION DOLLARS AND PROJECTED WITH FUTURE FORFEITURE TO REACH OVER FOUR MILLION DOLLARS. THIS SUCCESSFUL INVESTIGATION WAS THE CULMINATION OF A MAJOR EFFORT UTILIZING THE RESOURCES AND MANPOWER OF THE FBI, DEA, U. S. CUSTOMS, U. S. COAST GUARD, U. S. MARSHALS SERVICE, AND THE BEAUFORT COUNTY SHERIFF'S OFFICE.

WE ARE VERY FORTUNATE IN SOUTH CAROLINA TO HAVE A UNITED STATES ATTORNEY WHO AGGRESSIVELY PURSUES PROSECUTION OF DRUG MATTERS. WE WOULD NOT HAVE THESE SUCCESSES WITHOUT THE FINE WORK OF HIS OFFICE. WE ARE ALSO VERY FORTUNATE TO HAVE A FEDERAL COURT SYSTEM THAT IS RESPONSIVE TO THE DRUG PROBLEMS IN SOUTH CAROLINA.

TO INSURE FBI SOUTH CAROLINA IS CONCENTRATING ITS RESOURCES ON THE MOST SIGNIFICANT DRUG PROBLEMS IN THE STATE, I HAVE IMPLEMENTED THE DRUG INTELLIGENCE SYSTEM WHICH IS A COMPUTER DATA BASE ESTABLISHED TO SERVE AS A REPOSITORY FOR DRUG INTELLIGENCE INFORMATION RECEIVED IN THE STATE OF SOUTH CAROLINA FROM ANY, AND ALL SOURCES--FEDERAL, STATE, COUNTY, AND LOCAL LAW

ENFORCEMENT ENTITIES, INFORMANTS, AND THE GENERAL PUBLIC. THIS INTELLIGENCE WILL BE CONTINUOUSLY CROSS-REFERENCED AND ANALYZED IN ORDER TO TARGET THE MOST SIGNIFICANT DRUG ORGANIZATIONS. IN ADDITION, THIS WILL ALLOW THE FBI SOUTH CAROLINA TO ASSIST THE STATE, COUNTY, AND LOCAL LAW ENFORCEMENT ENTITIES WITH INTELLIGENCE FOR IDENTIFYING TARGETS THEY WISH TO INVESTIGATE EITHER JOINTLY OR INDIVIDUALLY.

ALSO, I HAVE PROPOSED THE IMPLEMENTATION OF THE SOUTHEAST DRUG STRATEGY. THE THE ESSENCE OF THIS STRATEGY IS FOR NEARBY FBI OFFICES TO CONDUCT SIMULTANEOUS INVESTIGATIONS FOCUSED ON THE SAME DRUG ORGANIZATION NETWORK BUT AT DIFFERENT GEOGRAPHIC POINTS WITH COMMON GOALS, THEREBY HAVING A GREATER INVESTIGATIVE IMPACT ON THESE ORGANIZATIONS. IT HAS BEEN CLEARLY SHOWN THESE ORGANIZATIONS DON'T STOP AT STATE OR JUDICIAL LINES. OUR EFFORTS IN SOUTH CAROLINA WILL CONTINUE TO FOCUS ON THE MAJOR DRUG-TRAFFICKING ORGANIZATIONS WHICH ARE IMPORTING AND DISTRIBUTING DRUGS INTO THE UNITED STATES AND WHO ARE UTILIZING SOUTH CAROLINA AS A SPRINGBOARD FOR THEIR OPERATIONS.

THE FBI'S EFFORTS MUST BE DIRECTED TOWARD SOPHISTICATED, DETAILED, LONG-TERM INVESTIGATIONS WHERE SUCCESS EQUALS THE REMOVAL OF THE ENTIRE NETWORK OF ORGANIZATION, AND NOT THE REMOVAL OF EASILY REPLACEABLE LINKS WITHIN THE ORGANIZATION OR THE SEIZURE OF REPLENISHABLE DRUGS. THE FBI HAS AN IMPORTANT

ROLE IN THIS DRUG WAR. WITH THE SUPPORT OF CONGRESS, ADMINISTRATION AND AMERICAN PUBLIC, WE WILL CONTINUE TO PLAY AN IMPORTANT ROLE IN THE BATTLE--ON THE FRONT LINES.

THE GOOD NEWS IS THAT WHEREVER I TRAVEL IN THE STATE OF SOUTH CAROLINA, I FIND STRONGLY COMMITTED LAW ENFORCEMENT AGENCIES AND COMMUNITIES. IT IS MY GOAL TO STRENGTHEN THIS RELATIONSHIP IN EVERY WAY POSSIBLE. MANY CHALLENGES NOW CONFRONT US--AND I HAVE NO DOUBT THAT MANY MORE ARE FORMING JUST OVER THE EDGE OF THE HORIZON. BUT SO LONG AS WE LOOK AHEAD--SO LONG AS WE ANTICIPATE AND PLAN, I AM CONFIDENT WE CAN MEET AND MASTER THESE CHALLENGES.

THAT CONCLUDES MY PREPARED STATEMENT. I WOULD BE HAPPY TO ANSWER ANY QUESTIONS YOU MAY HAVE AT THIS TIME.

STATEMENT OF ANTHONY R. ACRI, ASSISTANT SPECIAL AGENT IN CHARGE, ATLANTA DIVISION, DRUG ENFORCEMENT ADMINISTRATION, DEPARTMENT OF JUSTICE

Senator Hollings. Mr. Acri.

Mr. Acri. Chairman Hollings, Senator Rudman, it's a pleasure to be here today to represent the Drug Enforcement Administration. I am the assistant special agent in charge of DEA's Atlanta Field Division, 1 of 19 such divisions across the country. The special agent in charge, my former boss I should say, has recently transferred to Washington, DC, to head that field division. The new special agent in charge, Garfield Hammond, will be arriving from Chicago shortly. I am the interim representative of this division.

The Atlanta division encompasses the States of South Carolina, North Carolina, Tennessee, and Georgia. In the State of South Carolina DEA has offices in Charleston, Columbia, and Greenville. Chairman Hollings, this is the second DEA appearance before you in a week. Last Tuesday, Eugene Hayslip testified before you and the Senate Commerce Committee regarding DEA's efforts to stop diversion of chemicals to the illicit manufacture of drugs. We appreciate the support that you have given us in those efforts.

In the State of South Carolina we have targeted the highest level of drug violators and organizations. We focus on those drugs which have the most severe impact on the community. In 1989, 59 major violators were arrested. A total of 160 drug traffickers were arrested, of whom 90 percent were arrested for violations involving cocaine or its derivative crack. These arrests resulted mainly from investigations conducted in cooperation with State and local and other Federal law enforcement agencies. DEA special agents work closely with representatives of SLED as well as the sheriff's offices and local police departments within South Carolina's 46 counties. SLED's significant contributions are evident in the arrest of major traffickers and the seizure of their drugs and assets. We also work very closely with our sister Federal agencies, the FBI, IRS, the U.S. Postal Service, INS, the U.S. Marshals Service and of course the U.S. Customs Service.

We are fortunate to have aggressive leadership from the U.S. Attorney's Office in the prosecution of our cases. DEA's enforcement efforts within the State of South Carolina not only target the apprehension of drug traffickers but also the seizure of their assets. During fiscal year 1989 the Atlanta Field Division seized more than $71 million in drug violator assets. During this period DEA investigations in the State of South Carolina accounted for over $10 million being seized. More than $4 million was shared in fiscal year 1989 with 19 State and local agencies in South Carolina, including 10 sheriff's offices, the South Carolina Law Enforcement Division, the South Carolina Highway Patrol, and 6 local departments. As a result of a single 1983 investigation forfeited assets totaling $3.2 million were shared in South Carolina on September 20, 1989. The $3.2 million was divided as follows: $1.6 million to SLED, $1.3 million to Charleston County, and $330,000 to the Charleston Police Department.

Nationally, DEA seizes assets whose values exceed our annual budget. In fiscal year 1989 these seizures totaled $974 million. In conclusion, the Drug Enforcement Administration will continue its cooperative commitment with Federal, State, and local authorities to arrest those responsible, seize their drugs, and their assets. We will also continue our effort aimed at demand reduction, our initiatives involving law enforcement training.

Thank you, Mr. Chairman, for your continued personal interest in the critical issue of illicit drug trafficking and your support of the Drug Enforcement Administration. I would be pleased to answer any questions you have.

PREPARED STATEMENT

Senator HOLLINGS. Thank you very much. Your statement will be placed in the record.

[The statement follows:]

STATEMENT OF ANTHONY R. ACRI

Chairman Hollings, it is a pleasure to be here today to represent the U.S. Drug Enforcement Administration as you examine the abuse and trafficking of illegal drugs in the State of South Carolina. I am the Assistant Special Agent in Charge of DEA's Atlanta Field Division, which is one of nineteen such DEA divisions across the country.

The Atlanta Division encompasses the States of South Carolina, North Carolina, Tennessee and Georgia. In the State of South Carolina, DEA has offices in Charleston, Columbia, and Greenville.

The Atlanta Division is concerned with international drug trafficking along the Southeastern coast. The coastal border is host to substantial legitimate industry — commercial and sports fishing and international shipping, all of which generate marine traffic which provides a natural cover for smuggling vessels. Similarly, air smugglers conceal their approaches by blending with the traffic generated by offshore industry. Coastal South Carolina is less than 18 hours roundtrip flying time to several Central and South America countries.

Domestically, the DEA in South Carolina is involved in numerous cooperative drug investigative efforts, both federally and in several state and local inter-agency efforts. DEA participates in the Southeast Region Organized Crime Drug Enforcement Task Force (OCDETF). DEA Special Agents work with representatives of the Federal Bureau of Investigation, the Internal Revenue Service, the Bureau of Alcohol, Tobacco and Firearms, the.U.S. Customs Service, the, U.S. Marshals Service, the Immigration and Naturalization Service, the U.S. Postal Service, as well as state and local agencies. Our DEA offices in South Carolina are involved in significant OCDETF investigations, with six such cases currently open within the South Carolina federal judicial district.

DEA special agents work cooperatively with representatives of the South Carolina State Law Enforcement Department (SLED), as well as sheriff's offices and local police departments within South Carolina's 46 counties. The SLED's significant contributions are evident in areas involving the apprehension of major drug traffickers and the seizure of traffickers' drugs and assets.

South Carolina is a participant in the Domestic Cannabis Eradication Suppression Program, funded in part by the DEA on a shared basis with the state. During the 1989 eradication season, a total of 30,403 plants was eradicated from 230 plots, with 34 defendants arrested. DEA provides annual cannabis eradication training to state and local law enforcement, focusing on such areas as crop identification, raid procedures, and asset seizure. With the recent expansion of the National Guard's participation in the nation's fight against drugs, DEA is currently training National Guard personnel in cannabis eradication procedures.

DEA provides other training as well. Through our Division Training Coordinator, we annually conduct two-week law enforcement schools for state and local officers The training is conducted at the South Carolina Law Enforcement Training Center in Columbia. DEA also has presented Operation Pipeline training to 35 state and local officers patrolling South Carolina's highways. In February of 1989, DEA co-hosted the Law Enforcement Coordinating Committee's meeting in Myrtle Beach, S C. The crack cocaine training conference was attended by over 700 state and local law enforcement officers. Last week, training was provided in Buford and Myrtle Beach regarding the Jamaican Posse and crack cocaine investigations.

I would like to focus the remainder of my remarks on enforcement priorities and drug trends. In the State of South Carolina, we have targeted the highest level of violators and their organizations, and focus our efforts on those drugs which have the most severe impact on the community. During 1988, a total of 147 drug traffickers were arrested. 36 of those were classified as major violators. In 1989, 59 major violators were arrested. A total of 160 drug traffickers was arrested, of whom 90% were for cocaine and it's derivative, crack.

A high percentage of these investigations was in conjunction with local and state enforcement agencies. Cocaine remains in significant supply throughout the State of South Carolina. Due to availability, cocaine prices for a wholesale kilogram average $15,000 - $20,000, while street prices for a gram of cocaine average $100. Crack cocaine can he purchased in smaller quantity (1/10 gram) for as little as $10.

With the introduction of crack cocaine, we have seen abuse levels escalate in affluent areas, as well as the lower and middle class sections of our communities. The rapid expansion of crack trafficking into South Carolina cities and rural areas has demanded the attention of local law enforcement agencies. Police departments and sheriff's offices express profound concern over the speed and pervasiveness with which crack has entered their communities.

In addition to taxing the manpower of South Carolina's law enforcement agencies, crack cocaine has brought with it an alarming increase in the possession of semi-automatic weapons by traffickers. For example, on Sunday, July 9, 1989, Special Agents of the Columbia Resident Office, Greenville PD, Charleston Resident Office, South Carolina Law Enforcement Division, ATF and the Orangeburg County Sheriff's Office executed six search warrants and arrested nine defendants. During the course of the searches, over $405,000 in U.S. currency was seized, along with 33 firearms, including an Uzi, a Tech 9, and an M-11 semiautomatic rifle. Over a kilogram of cocaine and one pound of crack were seized from separate residences along with various crack manufacturing paraphernalia. Five residences, located on nine parcels of land were seized in cooperation with the U.S. Marshals Service. Twenty vehicles, including a Mercedes limousine, five Lincoln towncars, two Corvettes, a tow truck, an auto carrier (roll back), three motorcycles and a custom van also were seized.

Marijuana continues to he available throughout the state with prices averaging $75 per ounce and $750 per pound. In the early 1980's, marijuana seizures were of particular significance relative to coastal smuggling by motherships laden with Colombian marijuana off-loading along the South Carolina coast. While 25% of marijuana is domestically grown, intelligence has shown that marijuana grown in Mexico is now transported from Texas into and through South Carolina destined for New York and Boston. Even though motherships carrying marijuana are not as common as in the early 1980's, the coastal shoreline of South Carolina remains a viable off-loading site for drug smugglers. On June 24, 1989, a bale containing 23 kilograms of cocaine was discovered by a sport fishing vessel. The bale was floating adrift approximately 50 miles southeast of Charleston harbor.

The trafficking in heroin remains at the street-level of activity. New York City is the major supply source. The street-level heroin that is available ranges in price from $15 to $20 sold in capsule form. It is of the Southwest and Southeast Asian variety as opposed to Mexican brown heroin.

DEA' s drug enforcement efforts within the State of South Carolina not only target the apprehension of drug traffickers, but also the seizure of their assets. During FY 89, the Atlanta Field Division seized more than $71 million in drug violator assets. During this period, DEA investigations in the State of South Carolina accounted for over $10 million being seized. DEA has moved to share these assets with South Carolina law enforcement authorities. More than $4 million was shared in FY 89 through cooperative enforcement ventures with DEA and 19 state and local agencies, including ten county sheriff's offices, the South Carolina Law Enforcement Department, the South Carolina Highway patrol and six local departments.

As a result of a single 1983 investigation, forfeited assets totaling $3.2 million were shared in South Carolina on September 20, 1989. The $3 2 million was divided as follows: $1.6 million to SLED, $1.3 million to Charleston County and $300,000 to the Charleston Police Department.

Another area I believe that we can have an impact on drug abuse is through our Demand Reduction Program. In May 1989, our Special Agent who serves as our Demand Reduction coordinator was a key element in a rally in Columbia for sports drug awareness which was attended by nearly 500 coaches and young people. In December, DEA held a major drug awareness and prevention program in Hartsville, South Carolina. This program involved 2,500 students and teachers from five schools. Since 1985, throughout South Carolina, over 1,500 law enforcement personnel have attended DEA training and prevention programs.

In conclusion, the effects of drug trafficking have now reached beyond our major cities, beyond our secondary cities, and into our rural areas and small towns. The Drug Enforcement Administration will continue its cooperative commitment with federal, state and local authorities to arrest those responsible, seize their drugs and assets. We will also continue our efforts aimed at demand reduction, and our initiatives involving law enforcement training.

Thank you, Mr. Chairman, for your continued personal interest in the critical issue of illicit drug trafficking, and for your support of the Drug Enforcement Administration. I will be pleased to answer any questions that you may have.

STATEMENT OF LYDIA GLOVER, U.S. MARSHAL, DISTRICT OF SOUTH CAROLINA, U.S. MARSHALS SERVICE, DEPARTMENT OF JUSTICE

Senator **Hollings**. Ms. Glover.

Ms. **Glover**. Thank you, Mr. Chairman, Senator Rudman, I appreciate the opportunity to discuss the role of the U.S. Marshals Service in the Nation's law enforcement efforts to suppress the use of and trade in illicit drugs. Your U.S. Marshals Service's role in fighting the drug epidemic is extensive and varied. We jail those arrested for crimes, we produce them for trial, we protect witnesses and members of the judicial system, we track down and arrest most of the drug criminals that become fugitives.

Marshals also move dangerous prisoners nationwide to prisons and among prisons as well. In addition, it is the responsibility of the Marshals Service to seize, manage, and dispose of assets used in the illegal drug trade or bought with proceeds of drug trafficking. The Federal justice system simply cannot function without the successful performance of these tasks. Thus, an intensified effort to identify, apprehend, prosecute, and incarcerate major drug offenders relies on the efficient functioning of the processes of justice which, to a major extent, revolve around the operation of the U.S. Marshals Service.

The breadth and significance of the Marshals Service responsibilities as they relate to the Nation's antidrug programs can be summarized as follows: the criminal justice system has often been described as a revolving door. This can be an accurate picture when those charged with or convicted of crimes never appear in response to judicial warrants or are left to continually prey on society while avoiding the service of sentence. Thousands of felony warrants are issued for narcotics violations or other drug-related offenses each year.

As the Department of Justice agency with primary investigative responsibility for most Federal fugitives, the Marshals Service devotes considerable resources toward apprehending those fugitives with drug-related charges and backgrounds.

Innovative measures of fugitive apprehension have been employed by the Marshals Service personnel to locate and apprehend fugitives. FIST, fugitive investigative strike team, operations have been highly effective in coordinating manpower and resources of State, local, and Federal jurisdictions to safely and efficiently apprehend dangerous fugitives.

The district of South Carolina boasts nationally recognized Operation Intercept. This task force has been in effect since September 1986. Operation Intercept is comprised of State, local, and Marshals

Service personnel. It focuses on felony State and Federal fugitives. As of December 30, 1989, 1,023 actual arrests have been made. This has resulted in clearing a total of 2,326 felony warrants. Over 80 percent of these fugitives cases were drug related. Weapons, cash, conveyances, and other properties, along with cocaine, crack, and marijuana totaling $308,775 have been seized in this task force operation.

In addition, the Drug Enforcement Administration has transferred fugitive cases to the Marshals Service. Even before that transfer more than 50 percent of the fugitives sought by the Service had ties to illegal drug activity. The Marshals Service also participates in organized crime drug enforcement task force operations. One deputy marshal is assigned to each of the 13 OCDE task force locations. However, these cases impact on all aspects of Marshals Service operations and administrative functions.

The OCDE task force cases generate additional Marshals Service activity in the areas of international extraditions, witness security, criminal investigations, and asset seizure. During this past year the district of South Carolina participated in one international interdiction of a Medellin Cartel member from Switzerland, numerous other missions involving drug seizures, witness security, and criminal investigations are supported on a daily basis by the district.

The large profits netted from drug sales make the prospect of criminals jumping bond or bail very likely. When criminals flee to a foreign country, the Marshals Service acts as the Government's arm for reaching out and returning fugitives to the United States to face charges and put an end to their illegal activities. This program presents extremely complex and sensitive security considerations which must be dealt with case by case. These issues are carefully coordinated with foreign governments, Marshals Service headquarters and district or districts involved.

For example, last year President Virgilio Barco and the Colombian government began its new drive against drug trafficking by arresting and turning over drug fugitives wanted in the United States. These prisoners are taken into custody in Colombia by members of the Marshals Service special operations group and flown by a Service jet aircraft to the various locations in the United States where they face drug trafficking charges. Because of acts of violence attributed to the drug cartels in Colombia, these extradition operations are held expeditiously and with a high level of security.

In addition to the Colombian operations, the Service carried out 240 other international extraditions last year. The district of South Carolina has one deputy assigned to the Service's special operations group.

The Federal Government's witness security program, administered since its inception by the Marshals Service, has been and continues to be a powerful weapon in the war on drugs. The willingness of individuals to provide crucial testimony against organized criminal elements involved in the importation and distribution of illegal drugs is predicated upon our ability to protect witnesses from violent retaliation. Relocation, identity change, and other sophisticated services, including personal protection, all contribute to the willingness of vital witnesses to provide important testimony, often drug related, which would not be forthcoming without the Marshals Service's expertise in this complex and demanding area.

In 1989 the Service accepted more than 250 new witnesses into the program. Over 80 percent of these witnesses are testifying in drug-related cases. The district of South Carolina has served as a visiting site for numerous protected witnesses and also protects witnesses relocated within the State. The protection of endangered witnesses requires a variety of highly technical skills, both for the safe relocation of threatened individuals and for their protection during judicial proceedings.

While the public is generally aware of the security precautions employed by the Secret Service in protecting the President, it is not generally recognized that similar security arrangements are necessary each time a protected witness is transported to and from court facilities in order to testify in a trial of major criminals. The Marshals Service protects members of the Federal judiciary and court facilities against all forms of terrorism and violent tactics.

Judicial proceedings in drug cases are frequently of a high threat variety involving multiple defendants who have past histories of violent behavior. Cases generating broad media and public interest, as well as violent threats to the presiding trial judge, will intensify as law enforcement agencies focus on dangerous drug-related investigations. The large sums of money involved in illicit drug activity magnify the critical problems encountered during drug prosecution because the drug criminals can afford to buy services of violence-prone individuals who might attempt to free them.

In providing security as needed for all judicial proceedings nationwide, the Marshals Service must anticipate and fulfill the special security requirements for more than 200 sensitive trials each year and respond to a growing number of threats. Last year a total of 331 threats against the Federal judiciary were reported, a 55-percent increase over the previous year. State-of-the-art security systems and equipment as well as trained personnel are utilized to secure judicial proceedings and to protect judges under threat. During 1989, threat, burglary, vandalism, as well as threats of personal injury were directed at four members of the Federal judiciary in this district.

All persons arrested and detained by order of Federal courts for prosecution on violations of Federal law are placed in the custody of the Marshals Service. Each year over 85,000 persons are received, processed, transported, and jailed by the 95 Marshals Service offices. On any given day last year we had over 13,500 prisoners in Marshals Service custody, an increase of nearly 150 percent since 1984. Over 60 percent of these prisoners are drug-related offenders.

The district of South Carolina houses approximately 80 prisoners per day in 18 contract facilities. Courts convene in eight different geographical locations within the district necessitating numerous transports solely for prisoner production for judicial proceedings. This critically impacts on manpower inasmuch as two deputies are required for each movement. Therefore, more than one-half of the deputies assigned to the district are utilized in daily prisoner transports, leaving fewer than ten to accomplish other assigned responsibilities.

On a nationwide basis, the Service's national prisoner transportation system is continually required to provide extraordinary security for the movement of major drug dealers to and from scheduled court appearances. As a result of the critical shortage of sufficient detention space, the Marshals Service transports high-risk drug traffickers and apprehended felony fugitives hundreds of miles to the nearest available jail for overnight lodging. It has become a routine procedure to move dangerous and violent prisoners from Portland, OR, to Boise, ID; from San Juan, PR, to New York City; and, from Providence, RI, to Concord, NH, in order to find temporary detention space.

The district of South Carolina has been successful in securing adequate jail space to enable minimal distance in transporting of our Federal prisoners. We have requested CAP funds to issue guaranteed jail space, and this is a critical need nationwide.

The last thing I wanted to bring up is the Comprehensive Crime Control Act in 1984 authorized the establishment of the Department of Justice assets forfeiture fund. Responsibility for centralized management of the fund has been delegated to the Marshals Service along with a national program to provide uniform management procedures in the care, maintenance, and disposal of seized and forfeited assets. The program maximizes the Federal Government's ability to disrupt illegal drug trafficking by confiscating illegal proceeds and using them to further the Government's efforts against crime.

The value of seized assets in our custody has grown dramatically. Currently there are over 26,000 assets valued at over $1 billion in Marshals Service custody. These assets include houses, restaurants, ranches, operating businesses, apartment complexes, and other valuable properties. The district of South Carolina currently has in its seized assets inventory 3 vessels, 35 pieces of real property, 33 items of jewelry, laboratory equipment, and 83 vehicles. In addition, there are 57 cases in the district involving seized cash. The total value of seized assets taken into custody by this district last year is approximately three times the amount in custody just 2 years ago. Managing this variety and volume of assets requires many hours of effort.

Profits from drug assets seizures are put into law enforcement, thus using the criminal's money to fight crime. In fiscal year 1989 equitable sharing decisions were made to transfer property and cash from the fund totaling $161.9 million to State and local law enforcement agencies. Within the district of South Carolina last year the Justice Department shared $4,120,470 from the fund with State and local law enforcement agencies.

Mr. Chairman, that summarizes the Marshals Services activity with respect to law enforcement efforts relating to the drug problem, and I will be happy to respond to any questions you may have.

PREPARED STATEMENT

Senator HOLLINGS. Thank you. Your statement will be placed in the record at this point.

[The statement follows:]

STATEMENT OF LYDIA GLOVER

Thank you, Mr. Chairman. I appreciate the opportunity to discuss the role of the United States Marshals Service in the nation's law enforcement efforts to suppress the use of and trade in illegal drugs.

The U.S. Marshals Service's role in fighting the drug epidemic is extensive and varied. We jail those arrested for drug crimes,

produce them for trial,

protect witnesses and members of the judicial system,

and track down and arrest most of the drug criminals who become fugitives.

Marshals also move dangerous prisoners nationwide to prisons - and among prisons as well. In addition, it is the responsibility of the Marshals Service to seize, manage, and dispose of assets used in the illegal drug trade or bought with the proceeds of drug trafficking.

The Federal justice system simply cannot function without the successful performance of these tasks. Thus, an intensified effort to identify, apprehend, prosecute and incarcerate major drug offenders relies upon the efficient functioning of the processes of justice which, to a major extent, revolve around the operation of the U.S. Marshals Service.

The breadth and significance of Marshals Service responsibilities as they relate to the nation's anti-drug programs can be summarized as follows:

Fugitive Apprehension

The criminal justice system has often been described as a "revolving door." This can be an accurate picture when those charged with or convicted of crimes never appear in response to judicial warrants or are left to continually prey on society while avoiding the service of sentence. Thousands of felony fugitive warrants are issued for narcotics violations or other drug related offenses each year.

As the Department of Justice agency with primary investigative responsibility for most Federal fugitives, the Marshals Service devotes considerable resources toward apprehending those fugitives with drug-related charges and backgrounds.

Innovative methods of fugitive apprehension have been employed by U.S Marshals personnel to locate and apprehend fugitives. FIST_(Fugitive Investigation Strike Teams) operations have been highly effective in coordinating manpower and resources of state, local and federal jurisdictions to safely and efficiently apprehend dangerous fugitives.

The District of South Carolina boasts nationally recognized "Operation Intercept." This Task Force has been in effect since September 1986. Operation Intercept is comprised of state, local and Marshals Service personnel. It focuses on felony state and federal fugitives. As of December 30, 1989, 1,023 actual arrests have been made. This has resulted in clearing a total of 2,326 felony warrants. Over 80 percent of these fugitive cases were drug related. Weapons, cash, conveyances, and other properties - along with cocaine/crack and marijuana totaling $308,775 have been seized in this task force operation.

In addition, the Drug Enforcement Administration has transferred all its fugitive cases to the Service. Even before that transfer, more than 50 percent of the fugitives sought by the Service had ties to illegal drug activity.

The Marshals Service also participates in Organized Crime Drug Enforcement (OCDE) Task Force operations. One Deputy Marshal is assigned to each of the 13 OCDE Task Force locations. However, these cases impact on all aspects of Marshals Service operations and administrative functions. The OCDE Task Force cases generate additional Marshals Service activity in the areas of international extraditions, witness security, criminal investigations, and asset seizure.

During this past year, the District of South Carolina participated in one international extradition of a Medellin Cartel member from Switzerland. Numerous other missions involving drug seizures, witness security and criminal investigations are supported on a daily basis by the District.

Extraditions

The large profits netted from drug sales make the prospect of criminals "jumping" bond or bail very likely. When criminals flee to a foreign country, the Marshals Service acts as the government's arm for reaching out and returning fugitives to the United States to face charges and put an end to their illegal activities. This program presents extremely complex and sensitive security considerations which must be dealt with case by case. These issues are carefully coordinated with foreign governments, Marshals Service headquarters, and the District or Districts involved.

For example, late last year President Virgilio Barco and the Colombian government began its new drive against drug trafficking by arresting and turning over drug fugitives wanted in the United States. These prisoners are taken into custody in Colombia by members of the Marshals Service's Special Operations Group and flown by a Service jet aircraft to the various locations in the United States where they face drug trafficking charges. Because of the acts of violence attributed to the drug cartels in Colombia, these extradition operations are handled expeditiously and with a high level of security. In addition to the Colombian operations, the Service carried out 240 other international extraditions last year. The District of South Carolina has one deputy who is a volunteer member of the Service's Special Operations Group.

Witness Security

The Federal Government's witness security program, administered since its inception by the Marshals Service, has been and continues to be a powerful weapon in the War on Drugs. The willingness of individuals to provide crucial testimony against organized criminal elements involved in the importation and distribution of illegal drugs is predicated upon our ability to protect witnesses from violent retaliation. Relocation, identity change and a range of other sophisticated services, including personal protection, all contribute to the willingness of vital witnesses to provide important testimony, often drug related, which would not be forthcoming without the Marshals Service's expertise in this complex and demanding area.

In 1989, the Service accepted more than 250 new witnesses into the Program. Over 80 percent of these witnesses are testifying in drug-related cases. The District of South Carolina has served as a visiting site for numerous protected witnesses and also protects witnesses relocated within the state.

The protection of endangered witnesses requires a variety of highly technical skills both for the safe relocation of threatened individuals and for their protection during judicial proceedings. While the public is generally aware of the security precautions employed by the Secret Service in protecting the President, it is not generally recognized that similar security arrangements are necessary each time a protected witness is transported to and from court facilities in order to testify in the trial of major criminals.

Court Security

The Marshals Service protects members of the Federal judiciary and court facilities against all forms of terrorism and violent tactics. Judicial proceedings in drug cases are frequently of a high threat variety, involving multiple defendants who have past histories of violent behavior. Cases generating broad media and public interest, as well as violent threats to the presiding trial judge, will intensify as law enforcement agencies focus on dangerous drug related investigations. The large sums of money involved in illicit drug activity magnify the critical problems encountered during drug prosecutions, because the drug criminals can afford to buy the services of violence-prone individuals who might attempt to free them.

In providing security as needed for all judicial proceedings nationwide, the Marshals Service must anticipate and fulfill the special security requirements of more than 200 sensitive trials each year and respond to a growing number of threats. Last year, a total of 331 threats against the federal judiciary were recorded -- a 55 percent increase over the previous year. State-of-the-art security systems and equipment as well as trained personnel are utilized to secure judicial proceedings and to protect judges under threat. During 1989, theft, burglary, vandalism, as well as threats of personal injury were directed at four members of the Federal judiciary in this District.

Prisoner Detention and Movement

All persons arrested and detained by order of the Federal courts for prosecution on violations of Federal laws are placed into the custody of the Marshals Service. Each year over 85,000 persons are received, processed, transported and jailed by the 95 Marshals Service offices. On any given day last year, we had over 13,500 prisoners in Marshals Service custody, an increase of nearly 150 percent since 1984. Over 60 percent of these prisoners are drug-related offenders.

The District of South Carolina houses approximately 80 prisoners per day in 18 contract facilities. Courts convene in eight different geographical locations within the District necessitating numerous transports solely for prisoner production for judicial proceedings. This critically impacts on manpower inasmuch as two deputies are required for each movement. Therefore, approximately one-half of the 20 deputies assigned to the District are utilized in daily prisoner transports, leaving fewer than 10 to accomplish all of the other assigned responsibilities.

On a nationwide basis, the Service's National Prisoner Transportation System is continually required to provide extraordinary security for the movement of major drug dealers to and from scheduled court appearances. As a result of the critical shortage of sufficient detention space, the Marshals Service transports high risk drug traffickers and apprehended felony fugitives hundreds of miles to the nearest available jail for overnight lodging. It has become a routine procedure to move dangerous and violent prisoners from Portland, Oregon to Boise, Idaho; from San Juan, Puerto Rico to New York City; and from Providence, Rhode Island to Concord, New Hampshire in order to find temporary detention space.

National Asset Seizure and Forfeiture

The Comprehensive Crime Control Act of 1984 authorized the establishment of the Department of Justice Assets Forfeiture Fund. Responsibility for centralized management of the fund has been delegated to the Marshals Service along with a national program to provide uniform management procedures in the care, maintenance and disposal of seized and forfeited assets. The program maximizes the Federal Government's ability to disrupt illegal drug trafficking by confiscating illegal proceeds and using them to further the Government's efforts against crime.

The value of seized assets in our custody has grown dramatically. Currently, there are more than 26,000 assets valued at over one billion dollars in Marshals Service custody. These assets include houses, restaurants, ranches, operating businesses, apartment complexes, and other valuable properties.

The District of South Carolina currently has in its seized assets inventory 3 vessels, 35 pieces of real property, 33 items of jewelry, laboratory equipment, and 83 vehicles. In addition, there are 57 cases in the District involving seized cash. The total value of seized assets taken into custody by this District last year is approximately three times the amount in custody just two years ago. Managing this variety and volume of assets requires many hours of effort.

Profits from drug asset seizures are put into law enforcement, thus using the criminals' money to fight crime. In fiscal year 1989, equitable sharing decisions were made to transfer property and cash from the Fund totaling $161.9 million to state and local law enforcement agencies. Within the District of South Carolina last year, the Justice Department has shared $4,120,470 from the Fund with state and local law enforcement agencies.

Mr. Chairman, that summarizes Marshals Service activities with respect to our law enforcement efforts relating to the drug problem. I will be happy to respond to any questions you or the Committee may have.

MANAGEMENT OF SEIZED ASSETS

Senator **HOLLINGS**. Ms. Glover, this subcommittee has noted before the outstanding job being done by the Marshals Service and commend you and the Service. In comparison, for example, with the contract approach used by Customs, which we do not have in this subcommittee but, of course, we do have jurisdiction over the Marshals Service and are pleased to learn we are not having problems and the program is actually making money. I think the actual figure, for example, in DEA seized assets, while the DEA had an appropriation last year of $535 million, we seized and disposed of $650 million, so we made money last year. And the 1990 appropriation is $617 million, and the assets seized in 1989 were $973 million, so it's quite to the point you are doing a good job. Do you have a rule on disposing, let's say in South Carolina you have got these 3 vessels or 35 pieces of real property, do you dispose of them promptly?

Ms. **GLOVER**. We dispose of them as soon as we have the appropriate authorization to do so. We try to expedite the process as quickly as possible working with the U.S. Attorney's Office. When it actually gets down to forfeiture of the vehicle or the real estate, we then contract with realtors or with individual vendors for contract for personal services for that.

DEA STAFFING IN CHARLESTON, SC

Senator **HOLLINGS**. Let me go right to Mr. Acri on the DEA. We pointed out how you are making money and it's quite evident from all the witnesses that we need additional personnel, why would the DEA try to cut South Carolina two agents in the last 2 years. In the Charleston resident office, we used to have seven and they cut us back to five, are you familiar with that?

Mr. **ACRI**. Sir, currently in Charleston, SC, we have 6 agents and another agent will report there out of our basic agent class 67, which finishes up the beginning of April. So there will be seven agents in Charleston by May I believe.

OCDETF

Senator HOLLINGS. Senator Rudman and I mandated the restoration of these agent positions in the appropriations bill yet you say it will take from the beginning of the fiscal year in October of last year until April to comply? What about with respect to the organized crime drug enforcement task force, why doesn't the DEA assign an individual to it rather than man-hours?

Mr. ACRI. We currently have six active OCDETF cases with the other Federal and State agencies, but I will defer to Jim McGivney, the resident agent in charge in Columbia to respond to that.

Senator HOLLINGS. Jim, who is assigned to the organized crime drug enforcement task force from DEA?

Mr. MCGIVNEY. Right now, Senator, in the Columbia resident office we don't have anyone permanently assigned as such seated at the OCDETF offices. Instead what we try to do is devote the manpower on a case-by-case basis. It's my personal belief, and in the past 3 years experience, that we get a better bang for our buck. Right now I believe we have six OCDETF cases on the books. Each of those cases has an agent devoted to it. He may not be seated at the OCDETF offices full time, but he does devote his investigative expertise and time to the investigation. I think when we totaled it out in discussions with the U.S. attorney, we discovered there were actually four agents working OCDETF cases in the Columbia office. I can't comment on Charleston.

Senator HOLLINGS. Yet, to get that team effort that U.S. Attorney Daniel was talking about, you need somebody there who is assigned and working on the team and not just coming in at the end, and like you say, it is cost effective, then you take credit for the bust. That doesn't create the team effort and the team spirit that is quite evident with the U.S. attorney and with the FBI?

Mr. MCGIVNEY. Well, Senator, I beg to differ with you on the team effort. I think anyone you speak to in South Carolina, whether it be Federal or State or local law enforcement agency, will tell you that DEA works quite cooperatively with all of them. We have to. We have had a tradition of working cooperatively with the State and local agencies primarily because we have never had the resources to do otherwise. I have five agents to cover 33 counties. I can't possibility do it without cooperating with the other State and local agencies and the Federal agencies in South Carolina. I think that you will find during the course of the day that you will receive testimony from State and local officers just to that effect. You will find that DEA not only prides itself on cooperation with other agencies but we follow up and we service what we sell.

Senator HOLLINGS. And you say you only got five for 33 counties. You are saying you need more agents here, I take it?

Mr. MCGIVNEY. I don't think there is any question in that, Senator.

Senator HOLLINGS. You've got the money. You are ahead almost $300 million in the seizure and everything else. We are usually constrained and look for areas to cut to provide for other programs, but the DEA is a money-making organization.

Mr. MCGIVNEY. Senator, in the State of South Carolina DEA cases run the gamut of long-term title III investigations that you have heard mentioned by the U.S. attorney and by Mr. Verinder. We have probably in some of the cases that were mentioned, and particularly the *El Rukin* case, a lot of the basic investigative information that developed that case came from a title III wiretap DEA had in Greenville when we had only three agents in the State. Our investigations run the gamut from title III cocaine investigations. We have had long-term somewhat reactive investigations into clandestine laboratories in the Greenville area, and we led the investigation in the Orangeburg matter. We have done all of this with five people in Columbia. I don't think that we have to apologize for anything we have ever done here.

Senator HOLLINGS. The question is of doing more, and specifically, Mr. Daniel, would you rather have someone assigned to your organized crime drug enforcement task force or just catch as catch can with this gentleman here stretched all over the lot between 33 counties and five people?

Mr. DANIEL. I don't mean to take issue with Special Agent McGivney because he and I are old friends and no one supports our office and the cooperative team effort any more than Jim McGivney, but it seems from the Drug Enforcement Administration, I don't know if the cart is ahead of the horse or what, but the problem we have got rather than have four or five agents on paper assigned to the organized crime drug task force, I would settle for one man that I see his face every day or her face every day coming in that office and working there and they are there for every conversation with all the other agents and they go back in the field every day with those same other agents. In my view, based on my experience as assistant U.S. attorney and as the U.S. attorney, there is more bang for the buck when you have that team effort with individual agents assigned and reporting on a regular basis.

Senator RUDMAN. It's very interesting, it's one of the reasons we have these field hearings is to get different views and we respect all of the views. We have to sort them out. Is there some reluctance, Mr. McGivney, to assigning somebody full time to these task forces as they do in many places? Is it because of the scale of the agents you have here, is there some reluctance to do that? I am just curious. You obviously don't do it and you think your system works as well. I am not saying it doesn't, I just want to know what the reason is why you do that in this State?

Mr. MCGIVNEY. I do it in my office, which is the Columbia office. We have a OCDETF task force in Greenville and we have an OCDETF task force in Charleston. If I assign an agent full time to the Greenville task force and to the Columbia task force, I have effectively taken 40 percent of my work force and assigned them out of my office. Right now I have an agent assigned to an OCDETF case in Orangeburg. I have other agents assigned to other OCDETF cases. They respond to them as needed. They are not sitting at the U.S. Attorney's Office with the other task force agents. It's been my experience in the past that we have gotten better results in Columbia by not doing so. Mr. Daniel disagrees with me. I think it's a matter of philosophy.

Senator RUDMAN. So essentially I guess what you are saying is from the point of view of managing your assets efficiently, your view is you would rather assign them on a case basis as the cases arise rather than have them there at all times?

Mr. McGivney. Yes, sir; we develop cases which we, in turn, bring to the Law Enforcement Coordinating Committee and ask for OCDETF recognition and classification of OCDETF, and once that is done, the agent stays with the case until it's completed.

INTELLIGENCE GATHERING

Senator Rudman. I want to really ask this question of both Mr. Daniel and Mr. Verinder. First let me say to all of you here that we are impressed with the testimony, and in the two cases you developed. They were known to us. It's nice to hear from people who developed those cases. I am very interested, Mr. Verinder, in what you talked about in terms of intelligence gathering here in South Carolina. That is something we have spent a good deal of time and money on at the national level, and, of course, we now have, as you know, the El Paso Intelligence Center called EPIC which deals with both the Bureau and I expect DEA and other Federal agencies. The drug czar, Mr. Bennett, proposes we establish a new $86 million program to establish a national drug intelligence center responsible to the Justice Department, for whom you all work directly or indirectly. I guess I am interested in how you are developing this intelligence without breaching information that shouldn't be revealed to public. You are developing an intelligence data bank here in the State?

Mr. Verinder. Correct.

Senator Rudman. Are you sharing that with EPIC? What kind of interchange is there? We understand, as somebody mentioned in their testimony here, that this is really a—State lines mean nothing to these organizations, but jurisdiction in State lines means a great deal to Federal agencies. If you don't believe it try to do something in North Carolina, Mr. Daniel, so I guess my question is how are you going to deal with the intelligence in terms of what you are gathering here, in terms of national intelligence sharing because the FBI Director has said you are targeting national, international organizations. How do you fit that all in is my question?

Mr. Verinder. With drug cases you must have informants, that is part of our intelligence program. What I found when I arrived was I could not go anywhere to get the massiveness of the drug problem in South Carolina. The first thing I did was expand the intelligence base, mandated that every agent had an informant, had more than one informant if they were working in certain areas, producing informants.

The second part of an intelligence base is the vast information that is available from police departments, from the Joe Q., from various sources including EPIC. We have just initiated the drug intelligence system. We are taking all the information from our informants, EPIC. I have mandated that every agent travels to the 46 counties and talks to the sheriff, solicitor, if one resides in that county, and major police departments. We are taking that information, put it into a data bank and we are going to start massaging that information to see where the information points, because there are probably organizations that two or three departments are working independent.

We will then go to that department and say, "This is what you have, this is what maybe Greenville has. Do you want to work together?" We will disseminate that information. It's very early, Senator, in this and I am not sure of the success of it, but I can tell you the emphasis I have put on informant development has paid off. The cases I mentioned, two of the three, the Hilton Head Island we would not be there if it was not for that informant that was willing to go the whole 100 miles with us, nor with the case in Greenville where we used the electronic surveillance also without the informant coverages. It took us day to day to be able to talk about the organization. We are starting to pull it together. We are starting to get the information in from EPIC. There is vast information in this country.

Senator **Rudman**. But the information will feed both ways? Once you get it into some sort of a hard data base, I assume you feel a responsibility—DEA as well as the Bureau and U.S. attorney, to get this information back into the EPIC data base—because we are spending a lot of money on that. You spend a lot of money on systems and you wonder sometimes about people out in the field, did anybody get the word, and that is why I am asking the question.

Mr. **Verinder**. I would like to let the U.S. attorney address an issue that he and I are going to kick off with the LECC that the U.S. attorney runs. He recognized, and the executive committee of LECC recognized the need, and we have an agent flying in from New York to address the committee, and I will let Bart take it from there.

Mr. **Daniel**. Senator, this has been a vital concern to Special Agent McGivney, Special Agent Verinder, as well as Robert Stewart and myself. An intelligence base in South Carolina in coordination—as you say, money is being spent but do the people in the field know it's being spent and know how to use it. The first thing we have done is LECC, which is our man in the field where the U.S. attorney is charged with educating State and local law enforcement, as well as Federal law enforcement, and in promoting the team effort and a cooperative effort.

What we are trying to do now is we are putting on an entire conference with the FBI on intelligence sharing and how we can work it out, but more specifically we have been working with Chief Robert Stewart with the drug task force program, as well as Fred Verinder and Jim McGivney of DEA, and we intend to use some of the money we have been able to provide SLED to purchase—it is already at the order point—a very sophisticated computer.

What we will then do is have access to that computer wherein it will be a State where any sheriff's department or local police department can retrieve information and supply additional information, but, in addition to that, we will have a computer hooked up at the U.S. Attorney's Office in the drug task force office and we will be able to access that information. Now, obviously, Senator, we cannot have unlimited access to the Drug Enforcement Administration information or to the other types of information that will accumulate. In addition to the State computer we are going to have a Federal, sort of a Federal law enforcement intelligence, and the

State on a case-by-case basis if we can get them approval, a specific agent, approval for grand jury information, for instance, we will give them access to the new Federal computers.

Senator RUDMAN. Let me ask collectively this question. Some of you may not know this, but in my prior life I was attorney general in my State with statewide law enforcement responsibility, different from this State totally, but statewide, so I am very familiar with what I am asking about. What I want to know is who accesses the EPIC information now in South Carolina? Who can draw that up?

Mr. ACRI. The statewide operation is by SLED. SLED is the State designee in South Carolina to access all EPIC information, so for all State and local inquiries, it's followed through SLED through their coordinator who has direct access to the data bank in EPIC. Of course, we can access it through ours and all of the task forces we work with, we have all of the people, State and locals that work with us, deputized as DEA agents and they also receive access to those systems, so there is a formula for access.

Senator RUDMAN. What you are now talking about here is maybe having a system within South Carolina so you can have a better intelligence base of your own. One of the problems you are going to run into, and it's absolutely endemic anytime you try to set up an intelligence system, is people are very careful about putting their informant's management information into the system—not the names of informants, we all understand those don't go in—everybody is jealous of their informants. It's like in my State we used to say in a homicide everybody used to race to see who could get to the body first to bring the charge. Well, it's the same with informants; you have sheriff's departments, local police departments, Federal, State law enforcement departments and people are naturally reluctant to share not only the names—they won't do that—but even the data because the data sometimes can be used to identify the informant. So good luck to you, but be careful. That is a tough issue. But you are getting enough EPIC information is what you are saying? That is flowing all right?

Mr. ACRI. Yes.

NATIONAL DRUG INTELLIGENCE CENTER

Senator RUDMAN. What do you think of our idea of appropriating—probably I shouldn't ask you this because it will probably get you in trouble back home, home being Washington. What do you think of the idea of spending another $86 million for another intelligence network? Let me ask you, Mr. Acri.

Mr. ACRI. My personal comment on this——

Senator RUDMAN. Personal?

Mr. ACRI. Personal, right. I think the drug strategy sort of spreads out the money rather than consolidating it into one effort, and I include the intelligence effort in that strategy.

Senator RUDMAN. Mr. Verinder, do you have any view on this at all? Are you familiar with this proposal?

Mr. VERINDER. I am, and you hit the key when you asked us the question are we receiving it, if there is a mechanism to get that information to us. The mechanism is working with EPIC right now, but just starting. We are finally getting, without going into a lot of detail, starting to get key information that is allowing us to see the significance of drug smugglers using South Carolina. I don't know what controls would be in place. The key will be if the information is passed on to the OCDETF task forces.

Senator RUDMAN. Mr. Chairman, I think to me this is one of the most interesting issues and an important reason for having this field hearing this morning. Not just to hear what goes on here, because there are some very prominent people here, but in the intelligence area we are being asked for more appropriations and more money, and, quite frankly, you hear the same story up in Washington from your bosses, who are wonderful people. But they all have their own agendas, and if anybody really thinks we get a true prospective by listening to hearings in Washington, then they have been living on Mars.

That is why Senator Hollings thought we ought to have this hearing in South Carolina. I would like to have one in New Hampshire sometime—and we probably will—and other parts of the country to get a view from people who work with the system. You know it's like the defense hearings, you talk to the generals you get one story, you talk to the lieutenants and the sergeants, you get another story. We are getting that story this morning, and I think what you have told us about intelligence and what you have done is very important. Thank you very much.

STATEWIDE DATA BASE

Senator HOLLINGS. Where is that data bank other than El Paso? Do we have one in South Carolina that you are correlating yourself?

Mr. VERINDER. We are building one here in South Carolina, Senator.

Senator HOLLINGS. Who is we, the FBI, U.S. attorney, SLED, or whom?

Mr. VERINDER. We have the drug intelligence system, it's an FBI system. However, it is a system that Bart Daniel and I are sharing with everyone in OCDETF, including, as Bart mentioned, SLED. We are using it with our informant information, and I mentioned the contacts we were making throughout the State. We are finally having a data entry loader and putting it in and massaging it to see the significance of the organizations.

The second part of that was my Southeast strategy, where I am tying in North Carolina and Georgia, because we are finding these organizations are not exclusive to South Carolina. As the Senator said, State lines mean nothing to them.

LEADERSHIP

Senator HOLLINGS. Who is in charge of this? I think you are doing an outstanding job. U.S. attorney, are you in charge, Bart?

Mr. DANIEL. I think we really are a team, Senator, and that is the one thing, and I have known Lydia Glover, the U.S. marshal, for a long time, and Chief Robert Stewart from SLED, and now Jim McGivney and Fred, and I think you have in South Carolina a true team effort and I don't think we have necessarily one person in charge. We have people who have been in the system for a while and have experience in the field and are working pretty darn hard.

Senator HOLLINGS. The reason I ask, we still have got to get our act together at the national level. I have great respect for Mr. Bennett, our drug czar, but in reality he is not the czar we want him to be because he is not in charge. I know if I could put a Coast Guard officer in the Port of Bangkok where a large amount of these drugs are coming out, leave him there for 1 year, he would know where every ship was going, he would know every agent, he would know every stevedore, all the longshoremen, all the shipping companies, and he could tell you what is happening and when a ship was leaving with drugs.

Senator RUDMAN. There is no lack of volunteers for that job.

Senator HOLLINGS. From lack of coordination the State Department says, "No, we have too big an Embassy there now." Can you imagine that? I'm in the cold war following every Soviet ship. I can tell you exactly where it is as of this minute. Why can't I do it in the war against drugs?

REDUCTION IN AGENTS

So we have really in a cursory way approved and disapproved budgets, and, Mr. Verinder, to your amazement maybe, did you realize the Assistant Attorney General just 2 weeks ago said he was going to cut FBI agents?

Mr. VERINDER. Yes, sir.

Senator HOLLINGS. I think the public ought to know it. Senator Rudman and I are on to that, the reason being, of course, the $72 million from increased overtime costs, agent's overtime. They are making you eat that in your budget. Now I think we have got them back to where they said they would put the agents back on and not cut them, but to absorb this amount of money will result in a reduction of support somewhere along the line.

Senator RUDMAN. That won't happen.

Senator HOLLINGS. That is why we have these subcommittees, I can tell you that. I am really impressed with this presentation here. You all went over your 5 minutes, just like my wife, but to get the enthusiasm that you folks have in law enforcement, that is perishable. Keep it going, and anything we can do you just let us know. What do you need? Mr. Daniel, what else do you need? What else should we be doing that we haven't done, other than more money and more personnel? Do you have any other ideas?

CUSTOMS' CROSS-DESIGNATION

Mr. DANIEL. Those were Nos. 1 and 2, Senator, but I do have a third. I think you need specifically—we have got help on the way with additional Federal prosecutors. You can tell from these hearings, Senator, and, of course, you knew it before, we desperately need additional FBI agents and we desperately need additional DEA agents. Then coupled with that problem, it all becomes a personnel matter, is we have got Customs agents—we have a greater number of Customs agents, criminal agents in South Carolina, than we do Drug Enforcement Administration agents.

Unfortunately, unless the Customs people can show that a drug case is directly linked to importation, they cannot investigate it. Senator, we have a terrible problem with trying to get Customs agents cross-designated so they can work a drug case even on our organized crime drug task force. I speak from experience because as an assistant U.S. attorney I was there when the drug task forces started some 6 or 7 years ago, and we went to a meeting my first time back as U.S. attorney in Atlanta with the same people, everybody just had more gray hair and a little bigger pot belly. But, we were discussing the same problems we had discussed 7 years ago. I said I could have blinked my eyes and thought I hadn't been gone. It all boils down to having one person in charge of the Treasury as well as the Justice drug effort, and, Senator Hollings, there is no doubt you are right, that's the problem.

Senator HOLLINGS. That is an excellent idea. You come to a local area and you find that out, which I frankly didn't realize we had a problem with—and I have an office down there at Customs and I thought they worked hand in glove with everyone, not just on importation cases. I remember as Governor we had that problem with respect to forest fires, and the highway patrol was restricted. They couldn't go off the highway because their jurisdiction was just to the right-of-way of the paved road itself. Then finally, as Governor I deputized them all as constables and sent them to an arson school down in Florence, and now highway patrolmen seeing a fire or someone starting one, they can make that arrest.

We are going to have to deputize these Custom agents so they can go beyond—if it's a drug case—and follow it right along and not limit themselves just to importation cases.

Senator RUDMAN. I want to thank you all very much. It's been very interesting testimony, very helpful to us in the course of our hearings which we are starting in another week in Washington.

Senator HOLLINGS. Thank you very much. The subcommittee will be in recess for a few minutes.

[A brief recess was taken.]

STATE LAW ENFORCEMENT PANEL

STATEMENT OF COL. J.H. "RED" LANIER, COMMANDER, SOUTH CAROLINA HIGHWAY PATROL

Senator HOLLINGS. We will resume our hearings with State law enforcement officials. We welcome the Honorable Travis Medlock, our attorney general, Mr. Robert Stewart, the chief of our State law enforcement division, Col. Red Lanier, the commander of our South Carolina Highway Patrol, and Mr. Douglas Catoe, the deputy commissioner of our South Carolina Department of Corrections. If there is no objection, we will go from left to right. Colonel Lanier, we will hear from you first, sir.

Colonel LANIER. Thank you, Senator. We appreciate you coming and listening to us a little bit. We have some fine projects already started in South Carolina. The major agencies, law enforcement agencies, such as SLED, highway patrol, wildlife and ABC commission—alcohol, beverage, and control—we have our RAID team concept. Certainly from reading what you had to say about the situation, I feel if there are any moneys that need to be put toward drug enforcement, that particular unit could expand even more and get great results. We have gotten great results from our operation as a unit, and it puts all law enforcement, the water people, the investigators, the people that patrol roads and also people that get in the alcohol areas, and we can all work together.

We feel that we have a good operation with the FBI at the present time, working with the U.S. Attorney's Office. And, the Federal Government has funded a project where we are getting this unnumbered amount of stolen automobiles and all of it goes right back into the drug business. I am not going to say a whole lot, but that project is really successful, and we put undercover highway patrol officers that know the area and can help the FBI, and we feel that there should be a coordination between Federal and State to get these positive results that we are presently getting. Thank you.

Senator HOLLINGS. Thank you very much.

[The information follows:]

LETTER FROM CAPT. T.L. TAYLOR, SOUTH CAROLINA DEPARTMENT OF HIGHWAYS AND PUBLIC TRANSPORTATION

JANUARY 29, 1990.

From: Captain T.L. Taylor
To: Colonel J.H. Lanier
Subject: Stats on Pipeline and Governor's R.A.I.D. Team—1989

Attached you will find a copy of drug cases made by the South Carolina Highway Patrol on Operation Pipeline for 1989. This is an increase of 65.7 percent over 1988.

The Highway Patrol has 17 patrol units assigned to the Governor's R.A.I.D. Team and we now have two units per District assigned to Operation Pipeline, a total of fourteen.

All State Troopers have now been given training in the detection of drugs through in-service training at the Criminal Justice Academy and all new Troopers are also given this training.

Also attached is a report on the R.A.I.D. Team through November 17, 1989 on seizures along with a copy of type drug, quantity and street value of the drugs from June 8, 1988 through January, 1990.

If any additional information is needed, please let me know.

T.L. TAYLOR,
Captain.

Attachments.

1989 FINAL PATROL DRUG STATS

In 1989, the patrol made a total of 1,446 drug cases.

As a result of these cases, the patrol seized 20 vehicles, 1 rifle, 4 pistols, an assortment of jewelry and $137,660.62 in drug money.

The patrol made 1,123 cases for simple possession of marijuana.

The patrol made 49 cases of possession of marijuana with intent to distribute.

The patrol seized 33.56 pounds and 0.85 grams of marijuana.

The patrol made 161 cases for simple possession of cocaine.

The patrol made 39 cases for possession of cocaine with intent to distribute.

The patrol seized 5 pounds, 8.31 ounces and 27.53 grams of cocaine.

The patrol made 6 heroin cases and 68 cases for controlled substances.

[Figures as of January 8, 1990]

Type of drug	Quantity	Street value
Total of drugs purchased/seized from June 1988 through January 1990:		
Cocaine	851.07 lbs	$43,382,108
Crack cocaine	52.56 ounces	132,632

[Figures as of January 8, 1990]

Type of drug	Quantity	Street value
Heroin	16.5 grams	2,605
Marijuana	1,011.99 lbs	1,556,695
Marijuana eradication	58,522 plants	117,044,000
LSD	10 dosage units	245
Methamphetamine	2 kilos	200,000
Misc. substances	894 tablets	10,227
	300 grams	30,000
Total Street Value		162,358,512
Arrests for period June 1988 through January 1990	1,618	

SEIZURES FOR FISCAL YEAR 1989-1990
AS OF NOVEMBER 17, 1989

GOVERNOR'S RAID TEAM - SEIZURES

DATE	LOCATION	DRUGS	MONEY	VEHICLES	PROPERTY
07/11/89	Williamsburg County	3 grams/crack ($300.00 value)			
07/12/89	Lee County	84 grams cocaine ($3,600.00 value)	$ 1,310.00		
07/13/89	Orangeburg County	Methamphetamine (2 kilo $200,000.00 value) Preludin-15 tablets ($100.00 value) 300 grams-assorted pills ($30,000.00)	$ 63,000.00 cash 8,000.00 checks		
7/14/89	Lee County	½ gram crack ($40.00 value)			
7/24/89	Marlboro County	8 ounces/cocaine ($10,000.00 value)			

DATE	LOCATION	DRUGS	MONEY	VEHICLES	PROPERTY
7/28/89	York County	1/64 grams/cocaine ($150.00 value)			
8/2/89	Aiken County	370 lbs./marijuana (2,672 plants-$786,500 value)			
8/11/89	Colleton County	7.62 lbs./marijuana ($16,700.00 value)			
8/14/89	Colleton County	15 lbs./marijuana ($30,000.00 value)			
8/23/89	Lee County	285 grams/cocaine ($28,500.00 value) .5 grams/marijuana ($10.00 value)			
8/23/89	Williamsburg County	3 grams/crack ($300.00 value) .19 grams-marijuana ($10.00 value)			
8/30/89	York County	Dilaudid/92 pills ($4,600.00 value)	$ 37.00	1986 Oldsmobile Cutlass	
8/30/89	Berkeley County	329 lbs/marijuana ($394,800.00 value)	$ 2,040.00		

DATE	LOCATION	DRUGS	MONEY	VEHICLES	PROPERTY
9/00/89	The Hill/Orangeburg	2.79grams/crack ($220.00 value)			
9/01/89	Sumter County	1/8 ounce marijuana ($25.00 value)			
9/08/89	Lee County	2.5 grams cocaine ($320.00 value) 33 grams marijuana ($480.00 value)			
9/09/89	York County	Dilaudid/58 pills ($2,900.00)			
9/11/89	York County	2.61 grams/cocaine ($250.00 value)			
10/00/89	The Hill/Orangeburg	4.15 grams/crack ($420.00 value)	$ 3,160.00		
10/21/89	Horry County	1 kilo cocaine ($21,500 value) (1 kilo destroyed-see report) ($21,500.00)			
10/24/89	Charleston County	16.62 lbs. cocaine ($172,000.00 value)	$ 4,500.00		

DATE	LOCATION	DRUGS	MONEY	VEHICLES	PROPERTY
10/24/89	Charleston County	½ ounce/marijuana ($80.00 value)	$ 10,899.00	Robalo Boat	
10/25/89	Jasper County	6.27 grams/crack (640.00 value) 32.04 grams/marijuana ($115.00 value)	$ 1,679.00		
10/30/89	Horry County	25 kilos-cocaine $10,000,000.00 value)			
11/00/89	The Hill/Orangeburg	.25 grams/crack ($30.00 value) .35 ounces/marijuana ($45.00 value) ½ gram/cocaine ($50.00 value)			
11/04/89	Darlington County	7.78 grams/cocaine ($750.00 value) 17.37 grams/marijuana ($75.00 value)			

STATEMENT OF W. DOUGLAS CATOE, DEPUTY COMMISSIONER, SOUTH CAROLINA DEPARTMENT OF CORRECTIONS

Senator HOLLINGS. Mr. Catoe.

Mr. CATOE. I would also like to thank you for allowing us to appear before you today. Commissioner Evatt very much wanted to be here but had a schedule conflict that he could not get resolved. I think one of the important things that has to be remembered is that getting drug offenders off the street is a very essential first step, and I think we are doing, by and large, the law enforcement community in South Carolina, a good job of that. It's important to remember that they don't disappear when they come off the street.

The vast majority of offenders who go into our prison system come back out again, and I think it's critical we have the resources to do something with those offenders while they are in our prison system that will at least give them a chance and give us a chance for them to come out, and not in the same circumstances they went in or came in.

We began in 1971 with our first drug programs, federally funded at that time, and when those resources dried up, resorted to volunteer programs which worked well. We are currently putting a major emphasis on drug use identification and treatment. One of the exciting things we have just started is a first unit for 60 inmates, 48 male and 12 female, during the last portion of the sentence. This is a cooperative program between our department of corrections, the parole agency and the commission on alcohol and drug abuse, and it's the first time those three agencies have gotten together and provided a continuum of treatment for inmates who are getting ready to come out of the system.

They are paroled on condition of completing that 60-day program with us. It's an intensive 60-day therapy program with the therapy provided by the commission on alcohol and drug abuse. Then there is also a condition of that parole that they continue that care when they are within the communities with the local county offices of the commission on alcohol and drug abuse. That is the first time there has been that continuity of service available.

It's a brand new program. It has been in operation only about 90 days. One of the things we would very much like to do is expand that program. One of the most effective things we do also is a program that we have called Operation Get Smart, which is where inmates go back into schools and communities and talk particularly to young people about the things that led them into prison, what prison is like. They paint a very dismal picture of what prison is like, I think a very realistic picture, and from the comments we get from school administrators, from parents and from the students themselves, that is a very effective program. We would very much like to see that program expanded.

Again, I look forward to participating in this hearing and we want to thank you very much for allowing us to be here.

PREPARED STATEMENT

Senator HOLLINGS. Thank you. We will insert your statement in the record at this point.

[The statement follows:]

STATEMENT OF W. DOUGLAS CATOE

Senator Hollings, members of the subcommittee, thank you for inviting the South Carolina Department of Corrections to appear before you today. Mr. Evatt had planned to be here; however, he had an unavoidable conflict.

The department of corrections' most intensive efforts in the area of drug abuse began in 1971 when we were awarded a Federal grant to implement a comprehensive drug abuse treatment program. In 1974, the program was phased out when Federal funds were no longer available. When the program disbanded, we continued our efforts by using community volunteers for Alcoholics and Narcotics Anonymous groups and through social work services by continuing group and individual counseling in most of our major institutions.

Our current population reflects an increase in drug and alcohol abuse which compares to the escalating substance abuse in the community. A national survey done by the Bureau of Justice Statistics reported that about 50 percent of all inmates in State prisons were under the influence of an illegal drug or had drunk very heavily before they committed the crimes for which they were incarcerated.

A recent review of our inmate records indicates that 3,865 or 24 percent of our inmate population are incarcerated for drug and/or alcohol offenses. Some 805 or 5 percent of our inmate population are currently incarcerated for DUI offenses. Of the 16,056 inmates who are currently incarcerated, 6,865 or 43 percent of our inmate population reported that they committed their offenses while under the influence of alcohol and/or drugs. Since a great deal of this information is self-reported, we cannot assure you of total accuracy of these figures—there could be more or less people who fall into this category.

As the numbers indicate, substance abuse among the incarcerated is a serious problem. What is the department of corrections doing to alleviate this problem?

When an inmate first enters the department of corrections, he is screened and evaluated for possible alcohol and drug problems. The department does not have a detoxification unit since the majority of inmates have spent time in the county jail prior to their approval at an R&E center, and the detoxification has already taken place. If an inmate is determined to have a substance abuse problem, the classification caseworker notes this in the record and encourages the inmate to participate in a substance abuse service at his assigned institution.

We presently have a variety of services available at institutions through our social work services program. There are alcohol/drug information and education seminars, substance abuse therapy groups, Alcoholics Anonymous groups in 16 institutions and Narcotics Anonymous groups in 16 institutions. Volunteers from the community act as sponsors and conduct Alcoholics and Narcotics Anonymous groups. Approximately 8,274 or 52 percent of our current inmate population have had some type of substance abuse intervention while incarcerated. The social workers do not deal strictly with inmate substance abuse problems, but with a variety of problems—personal, social, adjustment, emotional, family, and substance abuse problems. The largest part of a social worker's caseload, however, are those relating to substance abuse issues.

In April of 1989, the S.C. Department of Corrections was awarded a $200,000 Federal grant which was used to establish an addictions treatment unit at our Watkins Pre-Release Center in Columbia. The unit which opened in August of 1989 is a cooperative effort among three agencies: the department of corrections; the S.C. Department of Probation, Parole, and Pardon Services; and the S.C. Commission on Alcohol and Drug Abuse. The treatment unit provides services in 60-day segments to 48 males and 12 females. Services include assessment, alcohol and drug education, intensive counseling, and release planning. Periodic urinalysis is also part of the program.

From the viewpoint of corrections, we would like to recommend that Federal funds be increased so that we can more effectively deal with substance abusers and reach a greater number of these abusers. In addition, an increase of funds would enable us to intensify our efforts to stem the flow of illegal drugs into our prisons, to allow random drug testing of inmates and staff, and to expand treatment programs for offenders. The Watkins program should be duplicated in the coastal and Appalachian regions.

STATEMENT OF HON. T. TRAVIS MEDLOCK, ATTORNEY GENERAL OF SOUTH CAROLINA

Senator HOLLINGS. General Medlock.

Mr. MEDLOCK. Senator Hollings and Senator Rudman, I will simply make a few brief remarks and I will direct mine basically to what the State of South Carolina has accomplished in the last 6 or 7 years by virtue of beefing up its criminal law provision, particularly with emphasis on the drug war.

Our administration has been very strong in pushing for tough sentencing and we now have a 25-year mandatory minimum sentence which cannot be suspended and for which there will be no parole. We, in addition to that tough sentence, which is working extremely well and I think is really a strong deterrent against the dealer in this State, we have put on the books in the last few years a very strong forfeiture act and have used that act to bring in revenues for our State and local law enforcement officials, and that has worked very well.

We also have the new statewide grand jury and I think that is probably the hallmark of the entire program. I would like to mention to you the effectiveness of that operation. Our new statewide grand jury which has jurisdiction only over drugs and pornography and, of course, principally drugs inasmuch as that is the burning issue. In the 6 months of its existence, with only one prosecutor, we have taken down with, of course, acting in conjunction with the Colonel here and the chief here, five major drug rings in this State dealing in everything from cocaine and marijuana to dilaudid, a prescription drug. That is with one prosecutor.

The organization and efforts of that operation have been very successful. As a result of the investigative operations of the State grand jury in conjunction with the followup raids through the Governor's RAID team, in conjunction with local law enforcement officers, I believe that I can say to this subcommittee that South Carolina is making a very substantial dent upon the trafficking problem. A chief of police recently told me that as a result of the combined coordinated efforts of the State grand jury and the operations that have revolved around it, that in his town the drug problem has simply dried up and there is no drug problem anymore.

I had a sheriff of one of the largest counties in this State tell me just the other day that as a result of indictments and a raid in his county that the cocaine supply has been reduced by 25 percent. I had another sheriff out in the rural areas—and the State grand jury has been able to get into the rural areas—apparently before we organized this operation the sheriff's with very small staffs in counties like Marlboro, Chesterfield, Orangeburg, Bamberg simply had no effective means of breaking these rings.

I remember when I was campaigning for the statewide grand jury, I went by to see Sheriff Foley up in the northeast corner of the State. This was, I guess, 5 or 6 years ago. He said, "Medlock, we are in trouble. I know who they are and we are watching them but we have no manpower and no investigative sophistication to run them down and they are running back and forth across the North Carolina line." So I asked him to support the statewide grand jury and we would help cure his problem. So what has happened is we are getting out there.

One sheriff told me in his small county the supply of cocaine has been reduced by virtue of these indictments and subsequent raids by 50 percent. So the plan is working. What we need in the State, I think, is more funding, and, of course, we have had the problem, an unanticipated problem of Hugo. We have other expenditures that we are facing of an unusual and extraordinary measure and our office needs better funding.

Recently in the drug prosecution of what we call the gun ring up in the northeast portion of the State, we were prosecuting some 13 dealers under these maximum penalties and I had to send one prosecutor who went there and faced 14 defense attorneys. She did not have an associate to assist her in this prosecution. We did not have a paralegal to assist her in that prosecution, and we continue to have demands from throughout the State, every county in the State, everyone is wanting the spotlight of the grand jury to shine on their counties and we simply are not able to do all of that because of our logistics problem.

But in the gun trial, I think it's interesting, Senator, and shows you what we could do if we had more money. We convicted 10 of the 13. We are going back against one that we did not convict. The leader of that organization received a sentence of 115 years mandatory minimum which cannot be suspended. He will have a hard time serving that out. I think he probably is in his forties or fifties, and the others all received substantial sentences. I am told that the word is going out through this State, I am told that some dealers who had planned to open operations here have moved northward from this State. If we could have three more prosecutors, we could triple what we are doing. Instead of bringing down 5 rings in 6 months, we could bring down 15 rings in the next 6 months.

So we are asking, Senator Hollings and Senator Rudman, very respectfully if you could give us a hand on this. There is money from grants through the Governor's office that we have petitioned for, but one of the problems with that is that apparently they will not provide personnel. They will provide supplies, logistics, machinery, equipment, but will not provide salaried persons.

If your subcommittee could take a look at how our office might be able to obtain attorneys, investigators, the human factor in this, it would be a great boon to our South Carolina antidrug effort. With that, I thank you very much for the opportunity of being here. I appreciate what you, Senator Hollings, are doing for our State in this matter, and you too, Senator Rudman.

PREPARED STATEMENT

Senator HOLLINGS. Thank you. We will place your statement in the record at this point.

[The statement follows:]

STATEMENT OF HON. T. TRAVIS MEDLOCK

Senator Hollings, I very much appreciate your giving me the opportunity to be here today to present my views on the drug problem and to offer suggestions as to solutions.

Nothing in recent memory has plagued us like the drug problem. Indeed, since the Civil War and its aftermath, few crises have tested our will more or made us optimistic about the future less. Drugs have transformed the landscape of this State and the nation. Schools, sports and workplaces, our streets -- even homes and neighborhoods are in peril. Drug abuse threatens to mutilate America's moral fiber and eat away at her character and soul.

We are fighting an enemy we cannot see. We are fighting with resources we do not have nearly enough of. But to wage all-out war, surely requires us to wage this fight on many fronts at once -- interdiction and enforcement; supply and demand; treatment and prevention. Yet, like a traitorous fifth column resistance movement, many of our own citizens, the so-called recreational drug users, give aid and comfort to the enemy -- the drug dealers. For those making a fortune pushing dope, or spending big bucks buying it, drugs are indeed a "big deal". But for the rest of us, the drug problem is a raw deal -- sapping our economy and tying down valuable resources critically required elsewhere.

Overwhelming frustration has led some even to advocate legalization, rather than eradication. But legalization is tantamount to surrender because it would admit to drug dealers that they have won. Instead, our goal must be nothing short of annihilation of drug lords, crack peddlers and dope dealers. Simultaneously, we must send a strong message that casual drug use by those putting huge sums of money into the dealers' pockets, will no longer be tolerated.

We cannot waste limited resources looking for a magical solution. We cannot waste precious time bickering over turf. Or complaining that the problem is just too big to be solved. We can and must call forth the fighting spirit that made this State and nation great, and focus on what works well.

As South Carolina's chief prosecutor, I believe I can speak with some confidence about measures which are effective in the drug war. We all know that the drug crisis is extremely complex and that our attack upon the problem must be comprehensive. A single-minded approach simply will not work. The problem will not be arrested without a sharp reduction in both the demand for, as well as the supply of drugs. On the demand side, we are making considerable progress in this State as people everywhere are taking demand reduction seriously. More specifically, the widely regarded "Strategies" drug education program is now in almost every school in the State. These efforts are beginning to take hold as demand seems to be going down. Obviously, we can never be satisfied, and that is why I recently presented to the Legislature a number of important proposals designed to punish the casual drug user and to reduce the demand for drugs.

But as a prosecutor, I believe that strong law enforcement is the linchpin of a sound drug strategy. If punishment of drug sellers and users is swift and certain, we send a powerful message that drug abuse is completely unacceptable in our State. By definition, that clear message helps reduce both supply and demand. That is why I am so excited about South Carolina's latest addition to its drug arsenal -- the State Grand Jury. This weapon is making South Carolina a national leader in modernizing its criminal justice system. With such a weapon in hand, we are at the forefront in equipping law enforcement with the tools needed to wage an all-out drug war.

The results thus far are dramatic. It is difficult to believe that in a little more than six months of operation, the State Grand Jury has broken up five major drug organizations operating in areas all over South Carolina. In that time, over 110 individuals have been indicted by the State Grand Jury for drug trafficking -- South Carolina's most serious drug offense -- carrying with it a mandatory minimum sentence of 25 years in prison. Thus far, three dozen individuals have been convicted for prison terms totalling 630 years and for fines amounting to almost a million dollars. At the just completed first trial involving members of the so-called "Gunn Organization", the Organization's leader alone received a sentence of more than one hundred fifteen years in jail time and was fined $650,000. That is what I call real deterrence to drug trafficking and to drug use.

In addition, with the help of our drug forfeiture law, we are hitting dealers where it hurts most -- by stripping their drug profits and enormous wealth. We have thus far seized at least 75 vehicles, 81 guns, and begun confiscation proceedings on 30 separate tracts of property, totalling more than 500 acres. Included, was the unprecedented seizure of a sixty acre tract, known as "Eagles Nest" in Lexington County which we believe was being used to facilitate the smuggling of cocaine into South Carolina. The checks allegedly used to purchase the compound were funnelled through a Panamanian bank which was guilty of money laundering for the Medellin cartel.

Law enforcement strongly believes the State Grand Jury is already putting a big dent in this State's drug trafficking operations. In fact, one police chief told me that -- as a result of raids stemming from State Grand Jury investigations, the drug trafficking problem in his town has been virtually wiped out. A Sheriff has said that the drug problem in his county has been reduced more than 25% because of the State Grand Jury.

Why, in such a short time, is the State Grand Jury becoming such a vital cog in South Carolina's drug war? First, unhampered by geographical limitations, we can now attack drug smuggling rings statewide. Drug pushers are not deterred by county boundaries, and when fighting a drug war, neither can we be.

Secondly, we are no longer limited to lower level dealers. As our successes thus far illustrate, if we are to make real progress, it is necessary to take out an entire drug organization, not just those small-time members on the bottom rungs of the ladder.

Third, and probably most important, the State Grand Jury gives state government the ability to coordinate, focus, and unify the efforts of law enforcement officials at all levels. Coordination is a key to winning this war just as much as it was to the Allies achieving victory over Nazi Germany in World War II. The reason law enforcement is strongly supportive of the State Grand Jury is simple. Having everyone working together with the tools and resources now at our command, enables us to wipe out drug organizations pursued by individual law enforcement agencies for years.

Drug dealers throughout the State know it too. They know we are now armed, coordinated and in hot pursuit. They know they will serve long prison terms -- in some cases for the rest of their entire lives. They will be having strong second thoughts about dealing their poison with impunity.

Here in South Carolina, we have followed the various drug proposals in Washington with great interest. Those proposals all make the role of state and local governments in the drug war a very important one. For example, many have advocated that states strike at the casual or recreational user. In this regard, I have endorsed enactment of a law by our General Assembly to suspend or revoke drivers' licenses for convicted drug users. And I have also recommended removing drug offenses from South Carolina's Pre-Trial Intervention program (PTI), another measure clearly designed to deter drug use. The casual drug user abuses everyone. Zero drug abuse must be our battle plan, zero tolerance of drug abuse, our battle cry.

The federal government has also stressed that states need to beef up their law enforcement efforts in the drug war and if they do, they will get the needed financial help to keep the war going full tilt. As I have already alluded to, we have spent the past seven years strengthening our criminal laws in this area and we are now prepared to hit the dealers head on. South Carolina has already accomplished what every state has been asked to do to be at the front of the line for strong federal assistance.

We have been asked to toughen sentences. Ours are now some of the toughest in the nation. We have been asked to enact strong forfeiture laws. Ours are as good as anywhere. States have also been asked to authorize greater investigative power against the dealers. None are more sweeping than ours. Dealers in South Carolina are now beginning to retreat, seeing long jail sentences coming, and their cars, cash and houses going.

But no army in the field -- no matter how tough it fights -- can exist for long with miserly support from the top. State and local governments cannot fight this drug war alone -- federal dollars are urgently needed to support our efforts and to help our newly equipped forces in South Carolina's drug war. South Carolina is itself stretched razor thin financially because of Hurricane Hugo and other pressing problems, many of which were unanticipated.

What we need most from the federal government is strong financial support for more prosecutors and attorneys, more investigators and agents, more equipment and support personnel. If through these hearings, you can find the ways and means to support our State Grand Jury, by getting to us federal money for additional legal staffing and investigative and law enforcement personnel, we can do the job that everyone needs and wants done. Right now at this moment, the State Grand Jury does not have nearly the staff and the funding necessary to keep up with the demand for drug investigations, in virtually every county in this State that are being made to us. The public is demanding immediate, decisive action against the drug dealers, and we need to give it to them. I strongly urge you to help us get on with the task ahead of us.

In the drug war, as any other previous conflict, history will not judge any of us by what we say, but what we do. Not by our rhetoric, but our results. The drug war is everyone's war -- every American's, every South Carolinian's. Someone once wrote that "it is not enough to fight. It is the spirit which we bring to the fight that decides the issue. It is morale that wins the victory."

Again, we very much appreciate your commitment to this battle by holding these hearings. With such strong commitment and the will to win, we cannot fail.

STATEMENT OF ROBERT STEWART, CHIEF, STATE LAW ENFORCEMENT DIVISION

Senator HOLLINGS. Chief Stewart.

Chief STEWART. I appreciate the opportunity to be here this morning. I bring you good news and bad news about the drug problem in South Carolina. I am going to give you the bad news first and maybe we can kind of end on a higher note. In South Carolina in 1988 we had a 76-percent increase in drug arrests for distribution and possession with intent to distribute cocaine, that is in 1 year. We had a 1,700-percent increase in arrests for distribution and possession with intent to distribute crack cocaine in 1 year. That was the year that crack really came into South Carolina and became the drug of choice.

Now, the figures for 1989 are not yet complete, and I don't think you are going to see as dramatic an increase, but you are not going to see a decrease in arrests either. In 1988 we had a 30-percent increase in armed robberies in 1 year. That is a drastic, drastic increase, most of which can be tied to the drug people wanting money to buy drugs. We had a 2-percent increase in murder on top of a 10-percent increase the year before, and much of this increase was from competition between drug dealers and those involved in the drug business eliminating competition and when drug deals would go bad.

Now some of this great increase is because of the intensified effort of law enforcement in the State on the State, Federal, and local levels, but a lot of it is increased drug business as well. Unfortunately, there is no time for me today to go into a detailed history of illegal drugs in South Carolina, but our present situation is this: No. 1, cocaine, especially crack cocaine, is the drug of choice in South Carolina. I-95 is a virtual pipeline coming up from Florida. Where we used to have boatloads of marijuana coming in to the coastline, now a person can put in a suitcase or a trunk in the back of his car a dollar value equivalent to a whole boatload of marijuana in cocaine, and very easily conceal it and bring it right into the State.

Occasionally a large load of cocaine will be brought in and intercepted in a boat or airplane, but those large loads coming into the State immediately leave and go back to Florida or to New York and other areas. The cocaine problem here is by kilos of cocaine being brought in by motor vehicle to numerous fairly large dealers located all over the State. And, these are the groups we are targeting with the State grand jury.

No. 2, marijuana. South Carolina used to be a major import point where marijuana was brought in by boat and to cow pastures and little unattended airstrips that are all over the State at night. We used to have a lot of that, anywhere from 10,000 pounds to 100,000 pounds being brought in at a time. With the joint State, Federal task force through the U.S. Attorney's Office some years ago we were very successful in hitting these groups, and with the sentences the Federal judges gave out, the operations were almost completely shut down for a time.

Some marijuana does come into the State from Mexico now, but much of it here is homegrown. Marijuana is now the highest cash crop in the State of South Carolina. We do feel like we are making some progress on that though. A couple of years ago we were eighth in the Nation for seizing marijuana plants right here in little South Carolina, but through our increased efforts of sitting on marijuana fields and catching the people cultivating the plants, we have cut down on it, we think, a good bit. But, we still have a long way to go.

Another thing that has been a tremendous help in this regard is the Federal Government. We can now use the South Carolina National Guard to help us with marijuana eradication, and during the marijuana season we have the South Carolina National Guard helicopters, which are funded by the Federal Government, helping us search out these marijuana fields and we have agents sitting on them and catching the people in them.

We have some heroin here in South Carolina, mostly in the metropolitan areas, and we have some dilaudid, which is a prescription painkiller drug which is morphine based, which really they would rather have than the heroin because the quality of it is always good since it's a prescription drug. We have just eliminated one group which was just over the line in South Carolina but furnishing most of the dilaudid going into the Charlotte metropolitan area in North Carolina. That group has just been eliminated by the State grand jury.

All other drugs in South Carolina are almost insignificant and they are on the decline, but cocaine is the big problem. There is some marijuana around and a little bit of heroin. In South Carolina the drug business today and drug enforcement is becoming increasingly dangerous. There are more and more guns and sophisticated weaponry around drug deals and drug businesses than ever before. We constantly run into semiautomatic weapons, and even some bully automatic weapons, and, of course, this is causing us to do better with our armament. SLED is now in the process of buying new weapons for all agents in the division. We have been armed with five and six shot revolvers for years and years, as you remember when you were Governor in charge of SLED, and now we are buying semiautomatic weapons for our agents. Incidentally, we are buying them with seized drug moneys, so it doesn't cost the taxpayers anything.

The trend in South Carolina at this point is for the larger drug dealers to set up their business in the rural areas. They are moving away from the cities, getting out into the rural areas where there are fewer law enforcement resources. As you know, you don't have to go far outside the big cities of South Carolina to be in the rural areas, so it's within easy driving range of citizens in the bigger cities to be able to go out and buy their drugs where these operators feel much safer because of fewer law enforcement resources out there.

To give you a couple of examples, we were called to a crack house operation in Williamsburg County not too long ago where a crew from Florida had come in and set up a crack house way out in the middle of nowhere. People were driving through, didn't even get out of the car. It was like a McDonald's drive-in. They would drive up and stick the money out the window of the car to the house, get the crack and drive off. We went in there and hit it, and there was a good bit of shooting, and thank goodness nobody got hurt. They tried to run over our agents with their cars as they were fleeing the crack house.

The traffic in there was so intense with people coming to buy crack. We finally had to put a car with a blue light flashing on the roof across the driveway so we could finish our search. We found a good bit of crack cocaine and marijuana and money in there and weapons from these people from Florida.

In Orangeburg County, you will be hearing later today from the sheriff, we have had the worst crack problem in the State set up just outside the city limits. The city of Orangeburg has 40 police officers. The sheriff only has about 40 to cover the entire rest of the county, and, as you know, it's a very large county down there, and this crack area known as the hill was set up. The sheriff and the president of South Carolina State College came and appealed to the Governor and me for assistance because these crack areas were out of control and some of the dealers were running over into the campus. We have been in there now for some months and really have had a good effect on that area.

We took bulldozers in and bulldozed the crack houses. We bulldozed the wooded areas from which they were shooting at the deputies every night. You could actually go in there now and set up a park. They ought to pick up some picnic tables and a swing set and put them out there where this crack area was. They have moved to other areas now, and as they move to other areas, we keep moving there and moving them. We are trying to move them across the State line into Georgia if we can.

Senator HOLLINGS. All the way to New Hampshire.

Chief STEWART. In Marion County we hit a crack house not long ago that was in a very low income area. A little, small three or four room house and we found over $400,000 packed into the walls of the house and in the back of an old television. So this is what we are running into right here in South Carolina.

Now the good news is, I am happy to report to you, that on the State level in South Carolina, we are becoming a model for the Nation in our drug enforcement efforts, and I can tell you in this State there is a true bipartisan effort. Governor Campbell, by executive order, created the RAID team. It stands for retaliation against illegal drugs. SLED had 23 agents to service the complaints and requests for assistance from sheriffs and chiefs of police to supply undercover agents. There is no way in the world we can make a dent or even get around to all of them. But by this executive order, the Governor instructed the highway patrol, the wildlife commission, the alcohol beverage commission to supply 12 State level officers and a supervisor to a combined State level drug unit. So, at the stroke of a pen, SLED went from 23 drug people to having access to a 60-man unit on the State level to work drugs in South Carolina.

The beautiful thing about it is it did not cost the taxpayers of this State one additional penny because everybody was already on the payroll at some agency, and all operating expenses for this organization are coming out of the drug proceeds and drug assets that are being seized. The Federal Government might do well to study this concept themselves.

There are no turf battles. We are all working together, all the State level law enforcement in South Carolina that has an interest in the drug business is working under one roof, in one building, and the results are very, very impressive.

No. 2, Attorney General Medlock appealed to the legislature and we now have the State grand jury, which he mentioned. It's very similar to the Federal grand jury and with that we target South Carolina groups that local authorities have not been able to touch. It's a very, very powerful tool and in multicounty cases we are using it with great results.

As with the RAID team, we get requests from the sheriffs and chiefs of police from the local authorities telling us where they have problems and we go in with both of these groups. We create teams of local and State officers once a drug group is targeted and then go after it and do whatever we can to get it. It's been very, very successful. The chief deputy attorney general who is heading that operation, was a former lead task force attorney with Operation Jackpot in the Federal system and a former Federal magistrate. The two SLED agents that are coordinating it, one was with the FBI for 25 years, a very professional man, very familiar with operating these type of grand juries, and we hired the former chief of the IRS Criminal Division to coordinate the financial investigation end of it. And, we all know, at this time of the year, nobody can track down a dollar better than the IRS, so we now have that man heading up the financial side of the State grand jury. And, in the short period of time that it has been in existence, we have indicted just over 100 people, all on trafficking charges.

The first case we had—30 people were indicted. We had 17 plead guilty. We convicted 10, and 3 low level people were acquitted, and that is not too bad an average. The second case will be called to trial later this month. There were about 20 indicted and 10 have already pled guilty. All of these convictions and pleas were to trafficking which carry mandatory sentences.

The third area on the State level is equipment. We have obtained through seizures, both with the State authorities and on the Federal level and through Federal grants, some of the most sophisticated and best equipment that anyone could possibly have. I would like to especially thank you gentlemen, and Senator Hollings especially, for the increase we are getting this year in grant moneys, and I know the fight you had over the split. There was an effort to make it a 50/50 split instead of 25/75, and it has been a tremendous help for us that you won that battle and we only have to pay 25 percent of the grant instead of 50 percent.

We have bought state-of-the-art equipment to include vans with night vision equipment. You can surveil any time of day or night. There is equipment in there where you mash a button and it gives you a full color hard copy printout of whatever you are surveilling. This is very important to us when you are surveilling a man and you finally identify him to be able to pass out pictures to all the units that are out in the surveillance.

We have a secure statewide radio system. We were working with the highway patrol for years on the radio, and everybody in the world was monitoring us when we would go on raids. But now we have our own system fully secure. You mash a button and nobody else can hear what you are saying. It's the same thing FBI and DEA are now using. We have bought undercover cars. We got a new airplane we use for surveillance work and to search out marijuana fields. We have just accepted delivery of a new state-of-the-art police helicopter with infrared capabilities, night sunlighting system and 50 percent noise reduction kit. We are buying lab equipment for our new $10 million crime lab which has just opened, and we received almost a $100,000 grant with moneys that originally came from your subcommittee to set up an intelligence system, quite interestingly enough, on the State level. That equipment I understand is going into operation this week and we will begin putting the information into that.

Last, we have very tough laws in South Carolina. As the Attorney General mentioned, we have mandatory sentences for all trafficking offenses. Our efforts on the State level are in three areas. One, we provide assistance to local and State law enforcement and to Federal law enforcement when they ask, and we do a lot of work with the Federal system. We do undercover operations of street level dealers where it's a problem, and we intensely work drug infested areas in an effort to return the neighborhoods to the good citizens who now live in those areas.

The second area we target is drug organizations. We go after these organizations utilizing the State grand jury and Federal grand jury. We do a lot of work as well with the Federal grand jury. U.S. attorney, Bart Daniel, is doing an outstanding job. I worked out of the U.S. Attorney's Office as State liaison for 7 years, from 1980 to 1987, and he and I were there together. At that time he was an assistant U.S. attorney, and I would join in his request that more Federal agents be made available to the drug task force concept. Having been there and lived through all the turf battles and tried to mediate as many as I could, and I am sure you will ask me a question or two about that, but I appeal to you to give more manpower to that effort as well. We target these groups and we go after them not only with buys but with historical and financial cases to take their assets.

The third area that State law enforcement is now getting involved in, which I can't emphasize too strongly to you, is we must have a strong law enforcement effort. Without it, the drug strategy will fail. But we will never succeed in the drug war unless we have a strong prevention program as well. We must reduce the demand for drugs. No matter what we do in law enforcement, if people still want drugs, somebody is going to get them in the country. So, we are now involved on the State level with drug abuse resistance education, the DARE program that the Federal Government is extensively funding now as well.

If we locked up every drug dealer in the State of South Carolina tomorrow, somebody else is going to take his place next week. We must get in there and get this DARE program going all over the State in the lower level school grades. We must help with the creation of peer pressure groups in the high school areas, win over the high school students that are most looked up to and most respected for whatever reason, athletics or whatever, teach them these drug reduction tactics and let the kids take the program over and let them run it. That will work, and I think it's the only thing that is going to work. Peer pressure is the No. 1 cause of the drug problem in this country and we must turn peer pressure into the No. 1 tool against drug abuse in this country.

We are beginning to see some hope here in South Carolina, I am happy to report. The citizens are getting involved and they have decided enough is enough. At one county council meeting in Orangeburg County where we have had a severe problem, we had over 1,000 citizens show up to say they have had it and they want to cooperate in any way they can and take part in any programs. So, I think the time is ripe for change, but we have got to have the strong enforcement effort, but we have to come in with this prevention effort as well.

The Federal emphasis that has lately come about has been a tremendous help to us on the State level. We are very pleased to see the military finally getting involved in this real war we are involved in. The work in foreign countries that is being done, the funds for prevention you are providing is important, and what we must do is get a strong program of prevention going in the schools, in education, and at the same time maintain the strong enforcement effort while the long-term effort in the schools and in the communities is taking effect. With this, I think we can win this war and we appreciate everything that you are doing.

Senator HOLLINGS. Chief, you have made a very significant statement as a chief law enforcement officer to emphasize the need to control the demand side and to give the balance you just articulated. There is no question. Senator Rudman and I have been in it 20 years. Like I said earlier, we have been to the Golden Triangle through Marseille and Turkey, to different countries. If we eliminated the country of Colombia, given the continued demand, we would still have drugs right here.

RURAL AREAS

Yet, I wonder when you say the drug problem is going rural. My experience is that all of these sheriffs really know everything that is going on in their counties. It seems like if I was in the drug business going from the city into the rural area, I would be going from the frying pan into the fire, because by the time I got into any rural area, I would be spotted quickly in this State, wouldn't I?

Chief STEWART. Yes, sir; I think you will hear from sheriffs this afternoon that they see the problem, but due to their lack of resources, they are having a real problem of doing anything with it. They'll go out there themselves and try to get information in order to get a search warrant or get people buying drugs, but to really root out the problem it takes an intense effort, not only in enforcement but financial, a historical-type investigation. We are now in South Carolina just getting the tools to do this, and with the RAID team on the enforcement side and the State grand jury on the prosecution side, we are now going in there and attacking these groups and having some success with them. We just haven't had the tools up until now.

SURVEILLANCE VANS

Senator HOLLINGS. Those surveillance vehicles with infrared which see in the dark of night, you have two?

Chief STEWART. Yes; and we also now have our helicopters equipped with that as well.

Senator HOLLINGS. You can use probably two more at least?

Chief STEWART. We can use all we can get, Senator.

Senator HOLLINGS. I guess that is the kind of equipment and everything else needed for a sheriff to really make the bust?

Chief STEWART. Yes, sir; what we do with all this equipment we buy with the grants and drug proceeds, we share it—as you know SLED is an assisting agency and all local law enforcement calls on us for assistance including even the Federal agencies—when they need a piece of equipment very quickly that they would have to go out of State to get, they call on us and we supply it to them. All of these Federal grants and all the money we get back from Federal seizures really goes right back into helping the Federal system as much as it does the State system.

Senator HOLLINGS. How many agents do you have now at SLED?

Chief STEWART. Gosh, we have a total commissioned force of about 250, but we have 450 people on the payroll—about one-half of them are support people and our new laboratory has about one-third of those sworn people.

MONEY LAUNDERING

Senator HOLLINGS. It's grown. I remember when we had altogether 34 on the payroll. You mentioned everything chief except money laundering. Is any of that being looked into with our banks? General Medlock, do we know anything about that? Incidentally, that one man grand jury, is that our friend, Sean Kittrell, isn't he working with the State grand jury now?

Mr. MEDLOCK. Cam Curry

Senator HOLLINGS. She runs it.

Mr. MEDLOCK. And Sean joined us 45 days ago, so we now have two to fight the entire war in this State. On laundering, Senator, we had an interesting situation. I, as a boy, lived in the Batesburg area over in Lexington County and I could never have dreamed that Batesburg would become the center of international attention for any reason. But, under the grand jury operation we discovered an airstrip over there in the area of Leesville and that airstrip was there to import cocaine allegedly from Colombia. The strip was purchased by a check drawn on a Panamanian bank which apparently had laundered the money for the Medellin Cartel and run through the legal system right here in the city of Columbia, and then a very elaborate compound set up in Lexington with communication systems that could go directly to the nation of Colombia directly to the Medellin Cartel. So we knocked that one out and, incidentally picked up that acreage. We have recouped about 500 acres as a result of our forfeitures in the State, so, again, laundering is a problem and I have this year in a package which I recommended about 15 different pieces of legislation have asked the general assembly to create a number of new provisions, one concerning money laundering.

We have no law, per se, against laundering in South Carolina. We are very confident that we will get that passed this year. I think money laundering is becoming more sophisticated. More individuals are not touching the drugs and not touching the money but are back there on the telephone simply running the operation for the kingpins and laundering funds, and that is beginning to seep up in our grand jury exploration. So we again think we have a handle on that.

DEMAND REDUCTION EFFORTS

Might I add on the demand issue, Senator Hollings and Senator Rudman, our office has sponsored for 4 or 5 years a program that we call "Be Free to Succeed" in which we have South Carolina famous persons, like astronauts, Colonel Bolden, or football players go around to the schools. We have been able to go into about 200 schools in the State. These individuals are not preachy but they are role models and they are conducting, I think, the type of educational antidrug programs that we need.

But, in addition to that type of program and the program that the chief has now going in the schools, I think we need comprehensive antidrug education. By that I mean not 1 week of education in a school, not just our Be Free people or the chief's people coming in one day, but I think we need the message to go to these students, particularly in the elementary grades, through their coursework. All courses that could relate to the drug problem, health, sociology, any course, psychology, within the school would include drug education. This is what we need to have, a comprehensive drug educational program. The State has that in many districts. Some districts do not have it. I think in order to have a real effective comprehensive antidrug program you are going to have to hit that demand problem through education. And, I think Federal expenditures would be necessary in this State because we simply do not have the wherewithal to finance that type of program. So I would respectfully join my colleagues here in suggesting that your subcommittee might take a look as to whether or not you can get additional grants for such educational programs.

DRUG GRANT—RESTRICTION ON PERSONNEL

Senator HOLLINGS. We will hear from those educators this afternoon and others of the alcohol and drug abuse commission, and Mr. McCord and others who really have brought the State national recognition due to the success of their program here. On drug grants, I want to look into that closely. That $5.7 million you have through the Governor's office. You say it's not for personnel. We don't know of that restriction. If it's us who needs to correct it, we can put a little rider on our bill that the moneys can be used for personnel. What would you do if you had extra personnel or whatever? You say you would have three, I believe, more prosecutors, is that right?

Mr. MEDLOCK. Senator, we would add conservatively three prosecutors and other support personnel like paralegals or perhaps some more law clerks to do basic research and leg-type work and generally backup staff. We are now in these rural areas, and that is really an interesting thing. In the rural areas they simply haven't had any enforcement mechanism until the State grand jury came in, and the Governor's RAID team came in, and this all developed about 6 months ago.

Some of these dealers were acting like they had franchises out there and they are shocked that suddenly the State of South Carolina says you are not going to have a franchise on drugs out here in the country and are closing them down. Some of them have been operating these rings successfully, running drugs from Mexico and Texas, up and down the east coast, sometimes using drag racing vehicles to bring them in with virtual impunity for about 6 years. So what is happening now is sheriffs from many rural counties are beginning to pile their applications on our desk over in the attorney general's office in the grand jury section, and we simply have numerous information regarding additional rings operating in the State that we cannot respond to because of a lack of manpower.

If we could add three prosecutors, several investigators, as I indicated, I think we could possibly double the number of rings that we strike down in the next 6 months. I think we have already had remarkable almost phenominal success, wouldn't you say, chief, in doing that?

Chief **Stewart**. Yes.

Mr. **Medlock**. With the personnel we can make a dent in this State so that not only the sheriff over in Bamberg tells me 50 percent of the cocaine is gone and a policeman up in Pageland tells me his town is virtually free of drugs now. We could have that voice resounding throughout the State that we have the dealers on the run, and we have turned it around and we are winning this war. I think that could happen if we had the manpower.

Senator **Rudman**. General Medlock, I sympathize with the problem you have. I think Senator Hollings and I both recognize that the problem, of course, has been a reluctance across the board with all Federal funding to fund personnel for obvious reasons. This may be a legitimate exception if it could be closely identified. The problem is that at the level of the Justice Department and other places there is a feeling once you start funding local personnel, then States tend to look to the Federal Government for that local personnel and don't do their share, so it's a very complicated issue. But I do believe that what you have done with your statewide grand jury is most interesting and I am sure at the meeting of the National Association of Attorney's General you will probably make sure all of your colleagues know about that. Does that fall under your jurisdiction, that statewide grand jury?

STATEWIDE GRAND JURY

Mr. **Medlock**. Senator, I am chief prosecutor for the State of South Carolina. I believe you had original jurisdiction statewide in New Hampshire and I have the same. We have 16 popularly elected solicitors who are sometimes difficult to manage——

Senator **Rudman**. That's an understatement.

Mr. **Medlock** [continuing]. But they are good guys and they do a great job, but that is the way our system works, and we pushed for this grand jury for several years. The legislature enacted it and set it up and it's been running now for 6 months with phenomenal results.

Senator **Rudman**. Where does the grand jury sit? Here in Columbia?

Mr. **Medlock**. It sits in Columbia, but it may sit in any area of the State.

Senator **Rudman**. Where do you draw the grand jurors from?

Mr. **Medlock**. Statewide draw, and they meet in the same building in which my office is located right behind this building here.

Senator **Rudman**. We will certainly look at your personnel issue because obviously we are doing a great deal at the Federal level increasing prosecutors. We have to increase DEA people and FBI people, but I forget what the ratio is; it's probably 7, 8, 9, 10 to 1 prosecution State versus Federal, which a lot of people lose sight of. We talk about the Federal war on drugs, it's the State war on drugs. The overwhelming number of prosecutions inevitably happen in State courts for a variety of reasons. This may be an issue we have to look at closely. Chief Stewart, you have statewide jurisdiction in these kinds of areas?

Chief **Stewart**. Yes, sir.

FEDERAL FUNDING FOR SLED

Senator **Rudman**. And what kind of direct Federal funding have you got? Senator Hollings I am sure is familiar but I am not and I am curious how you have used what Federal funds you have received other than forfeiture money, grant money, and so forth?

Chief **Stewart**. We had a grant, let's see, 2 years ago I believe it was, that we bought the vans that we talked about—some very sophisticated surveillance equipment, night vision equipment, radio communication.

Senator **Rudman**. That was Federal funding?

Chief **Stewart**. Yes, sir; and then last year we got a grant for this intelligence system, this State level intelligence system, which should do for the State the same thing, I guess, NADUS does with DEA and maybe what EPIC does on the Federal level. And, then last year we got some equipment for drug identification equipment for the laboratory. We have got a tremendous backlog in our laboratory and we are going to be applying this year for some grant money for more lab equipment, possibly some more surveillance equipment and we are entertaining the idea of some grant money for the DARE program to provide the training for the local departments.

DARE

Senator **Rudman**. How broad is the DARE program here in South Carolina?

Chief **Stewart**. It's just really getting started here. North Carolina, which is extensively into it, SBI, our sister agency up there came down here and have been instructing local officers here and they are asking us to take over the training function here in South Carolina, which we intend to do.

Senator **Rudman**. It's been used very successfully in New Hampshire. It's an excellent program. I agree with General Medlock and your statement that as much as we talk about law enforcement—and it's important that we continue the effort and increase the effort because the threat is increasing—nonetheless, if we are going to get that threat reduced, we are going to have a perestroika in the drug war so to speak 20 years from now. The only way we are going to get it is by starting with kids who are presently in school—it's one person's view after listening to this problem for 20 years—starting with youngsters back in the kindergarten years, uniformly through their school years. By the time those youngsters are 7, 8, 9 years of age they have instilled in them the problems that will come to their lives if they use drugs. I think that the crime problem starts to drop off from the other end, but that is in the future. I think we have lost some people.

RECIDIVISM

With all due respect to rehabilitation, Mr. Catoe, I think you have to keep trying, but the amount of recidivism in this area, and as well as many other areas, is enormous. I was going to ask you what kind of recidivism rate you have here in South Carolina in terms of those you try to treat and how they come back into your system.

Mr. **Catoe**. It's about 33 percent, Senator, and we have done that study over the last years and it has consistently varied between 30 and 35 percent. The most recent was 33 percent.

Senator **Rudman**. That is not bad. That is better than the national average. What kind of money, Colonel, have you had in your agency, Federal money? You had a lot of Federal money for a variety of things, but that which might be in some way related to this problem?

HIGHWAY PATROL

Colonel **Lanier**. We haven't received any significant moneys for highway patrol. Our moneys usually come through highway safety, and currently we have 62 people that do interdiction. We have 17 men assigned to SLED on the RAID team, and we are presently now forming a five-man team to go around on commercial buses and check them for drugs.

Senator **Rudman**. How big is your patrol?

Colonel **Lanier**. 967.

Senator **Rudman**. Back in the days before I was in the Senate I used to drive down here and I used to meet some of them from time to time—very courteous people as I recall.

Colonel **Lanier**. I hope so. We also have a canine dog that the Federal Government funded. That is the only thing we have gotten from drug money, and it's been very effective.

STATEWIDE GRAND JURY

Senator **Rudman**. General Medlock, one last question, and I know we are coming up on noon and we have two panels this afternoon, but your statewide grand jury as I understand it is used in conjunction with information you get from the various sheriffs' departments, local police departments, highway patrol, SLED, et cetera. It feeds in from all of those agencies, is that correct?

Mr. **Medlock**. That's correct. Petitions come from the sheriffs, and Chief Stewart is the chief investigator for this organization and he coordinates the investigative effort.

Senator **Rudman**. It's a very special statute. In other words, as I understood your explanation, you only have jurisdiction in limited areas, drugs, pornography, is that it?

Mr. **Medlock**. Drugs and porno. It's one of, I think, only 13 such entities in the Nation. Florida has an effective statewide grand jury. Pennsylvania has had pretty good success with it, but South Carolina I believe is the leader in the Nation.

Senator **Rudman**. I have known of statewide grand juries, but I have not heard of one that had targeted jurisdiction, which is what you have got here. I assume politically you had to do something in a limited way or else you start having problems getting support for that?

Mr. **Medlock**. It was what we could get under the political realities, the limited jurisdiction. I think it was a good place to start and it has worked real well

Senator **Rudman**. Of course, Mr. Chairman, coming back to what we were talking about a few moments ago, it just seems to me that since they have a targeted grand jury system here, it's a very good incentive for the statewide grand jury to go after particular problems since that's the jurisdiction. That is almost kind of a pilot program and I would be very interested in seeing if we could get some exceptions to fund them elsewhere in the country. Let's see if maybe that works, because we are doing that with the Federal agencies and the Federal agencies only have a fraction of the drug prosecutions. It's a very innovative idea. I would like you to keep the subcommittee informed about how you are doing on that, both General Medlock and Chief Stewart, because it is ideas like this that sometimes we can use very effectively in how we tailor some of the legislation. I want to thank you all very much for your testimony. It's been very helpful.

Senator **Hollings**. The statewide grand jury is a good tool, I agree, Senator, with the coordination and the visibility that is given and the attention to the public. It sort of self-educates us when you institute one of those and if we can help with the financing, that would be a legitimate way without interfering with the police powers of the State. Let me ask with respect to money laundering. I am thinking of my banker, you know, they'll come up and give us a big dinner and we have all kind of bank legislation. Can that group help coordinate efforts against laundering and so forth on a voluntary basis? Do they have within the South Carolina Bankers Association any kind of voluntary surveillance kind of program to help catch the laundering, stop the laundering?

Mr. **Medlock**. Senator, I am not aware of that, some of the other panelists may be. Of course, there is the Federal reporting law that requires the reporting of any transaction in cash in the amount of $10,000, and we have considered putting in a bill perhaps to also make that a State law also for purposes of being enforced through the State grand jury operation, but I am not familiar with any volunteer effort.

MARIJUANA

Senator **Hollings**. You are using everything at hand to fight drugs, including the National Guard. Using that National Guard, chief, are you still saying that marijuana is our principal cash crop in South Carolina?

Chief **Stewart**. Because of its value, yes. We are making a lot of progress on that. It's kind of like hunting liquor stills back in the days when you were the Governor and we were all running around chasing liquor stills. I was very young then but I enjoyed doing that. Catching marijuana patches is just like liquor stills. As a matter of fact, some of the old bootleggers are growing marijuana. They use the same tricks to cover, put a thread across the trail so they can tell if you have been in and out, but, in any event, we are having a lot of success with that. I think as in the white lightening days you will see some progress there.

STATE PRISONS

Senator **Hollings**. Well, the prisons, Mr. Catoe, I think I saw some projection that by 1993 you needed 9,000 more prisons cells. We are putting in some 33,000 beds this year at the Federal level, and, as you know, we have one particular facility being built down at Estill. Are you going to be able to stay ahead of the curve and hold all of these prisoners while all this wonderful work is being done? They are filling you up, aren't they?

Mr. **Catoe**. The curve has been running us a pretty good race, Senator. The present projections are absolutely catastrophic I think, and I think that is why I would certainly echo the commitment to the prevention program. I think we have to start looking at the other end of the problem. I saw an article in U.S. News and World report, I believe it was several weeks ago, where the State of Indiana now in projecting their bed space needs 15 years from now, part of that is they are identifying second graders at risk, and the idea that we can identify those kids at this point but that our response is—and I am sure they are doing other things—what we are going to do about it? We better be planning to build them a prison cell in 15 years.

I think, Senator, we have lost some people very clearly, and we are never going to get all of them back. I think the problem we have is with people who come into the prisons as addicts is that we have all the prison space we need in South Carolina for the major distributors that Chief Stewart and General Medlock are doing an excellent job of targeting and getting in. The people who are filling up our prisons are users. They are the thieves, the break-in artists, the shoplifters, and if we turned those people back out as addicts, they are going to continue to be those kind of people, and I'm not pollyannish enough, and I don't think anybody else in the system is, to think we are going to cure all of those people. I think we can do a better job than we are doing and I think we owe it to ourselves to provide the resources to allow them to change that kind of behavior if they want to.

Senator **Hollings**. You have drug testing of every prisoner. Is this voluntary or mandatory?

Mr. **Catoe**. It's a combination of the two. One of the things we would like to do, we have some pilot programs in our work release programs which, again, are inmates nearing the end of their sentences. We would like to expand that program into our entire work release program, and then probably expand it into the entire prison system.

One of the things that is happening to us as inmates continue to come in, about 50 percent of our inmates tell us they were under the influence of either drugs or alcohol at the time they did whatever they did to come in.

Senator **Rudman**. What percentage were drugs and what were alcohol? I am curious.

Mr. **Catoe**. I don't have it broken down that way, Senator. It's usually a combination of the two. I think you rarely find somebody that uses one and doesn't use the other, particularly if he used drugs and doesn't use alcohol. In the last 4 years, for instance, the number of inmates who are voluntarily seeking drug treatment through Narcotics Anonymous and Alcoholics Anonymous that we have in our system, have doubled. So, the inmates themselves recognize the need is there, and, again, our prisons are being filled up with what somebody said earlier are the foot soldiers. The general and Chief Stewart are getting the generals, and we need to provide prison space for those people forever.

Senator **Hollings**. I don't want to allude—because we are trying to keep Myrtle Beach open, but this subcommittee is going to use, whenever possible, every military facility that they close down. We are pressured right now. We are 65 percent overcrowded at the Federal level. You are about 35 percent overcrowded at the State level, and these judges are facing us at every particular turn letting them out on the streets and what have you. We took the Olympic Center up at Lake Placid, NY, and by the time the athletes left, we had to fill up the barracks there, put in prison bars, and made it a prison cell. We use everything we can get our hands on to try to economize and meet the demand for increased prison capacity.

HIGHWAY PATROL

With respect, Colonel Lanier, to the highways, I-95 and otherwise, do you have a courier profile of where they stop and where they might be? Have you studied it and discovered particular areas where you might be making some intercepts?

Colonel **Lanier**. Yes; we have 62 people that do that daily, and we authored—I did through IACP, authored Operation Code Flame, Florida to Maine. That was my idea, and we are going to have it again very soon and you will be reading about it in the paper. We will be operating from Florida to Maine, and we have already sent two of our captains down to coordinate that program. It is coming up very soon, and it's been a highly successful program, and that's drug interdiction on I-95. And other State police, which we will be meeting in Hilton Head next week to discuss highway safety, and this will be part of our program at Hilton Head.

Senator **Hollings**. Chief Stewart, one final question. Is there any lack of coordination? You considered to be in charge, is that right? You sort of coordinate not just the State efforts, but are working, let's say, Sub Rosa, coordinating the Federal aspect to drug enforcement in the State? Who is the coordinator in South Carolina?

TEAM EFFORT

Chief **Stewart**. Well, technically under the Governor's executive order, SLED coordinates the mission, but we don't push that. The four agencies heads involved, we meet every other month on the RAID team—the chief of ABC, the highway patrol commander, and the wildlife chief. We sit down and coordinate everything. We don't have any problem with that.

Senator **Hollings**. How about with respect to the Federal effort?

Chief **Stewart**. We have agents stationed full time at the U.S. Attorney's Office, just as I did before I had to sit behind a desk, and that works real well. I am truly committed to the teamwork philosophy of doing things, and having been at the U.S. Attorney's Office during the jackpot days we see what it will do, and I support Bart Daniel in his revitalization of the task force concept in the U.S. Attorney's Office.

In defense of some of the Federal agencies, I must say this, I think you would see more participation if they had more resources. DEA in Columbia here only has four or five agents, and they get caught in this vicious cycle of statistics. I mean they have to come to you and justify their existence. The only way they do it is with statistics, and when you have a team of agents—and the way to get a big dope organization on the Federal level is like what we are doing on the State level—you put an IRS agent, a Customs agent, FBI, DEA, you put them all together on a team and you target that group with State agents and you go after them. But then, what happens to the statistics, because you might not have any IRS violations or you might not have any Customs violation, and they can't justify their own people. So I don't know how you get around the statistic game. If you could get that out of it and get the manpower in there, you would see all the Federal agencies going to that concept, but they live and die by their statistics.

SUBCOMMITTEE RECESS

Senator HOLLINGS. When you say five agents in Columbia, they must have gotten here this morning because that is what they are going to say when we get to Charleston or Greenville. They must put them in a car and run them around to meet these hearings because there are only 10 in the entire State. This has been outstanding. We really appreciate each of you here. Thank you very much. The subcommittee will be in recess until this afternoon.

[Whereupon, at 11:53 a.m., Monday, February 12, the subcommittee was recessed, to reconvene at 2 p.m., the same day.]

(AFTERNOON SESSION, 2 P.M., MONDAY, FEBRUARY 12, 1990)

NONDEPARTMENTAL WITNESSES

LOCAL LAW ENFORCEMENT PANEL

STATEMENT OF HON. C.R. SMITH, JR., SHERIFF, ORANGEBURG COUNTY SHERIFF'S DEPARTMENT

Senator **HOLLINGS**. The subcommittee will please come to order. We are pleased this afternoon to start with Sheriff Thomas Mims of Sumter, Sheriff "Bubba" Leroy Montgomery of Fairfield, Sheriff Smith of Orangeburg, and Chief Wilbur of Columbia. Chief, you were here during the old days, uh?

Chief **WILBUR**. Yes, sir, Senator, I came here in 1956.

Senator **HOLLINGS**. Then you know because back then we had all the protests—sit-ins, wade-ins, and what have you. It was a Dutch boy at the dike situation of peace—law and order and respect for the law in an even-handed fashion. By the time we would address one protest out in front of the church down here by the Capitol, then there would be one in Sumter. By the time I would run over to Sumter, we would run down to Charleston and then run up to Rock Hill. They kept us on the run. At that time though we could proudly say that no one was seriously injured, no one lost a life in your State and mine during that period of time. So we have come through it now with a tremendous feeling of good will and understanding. But, now we have an even worse menace, in a way, with this drug menace and you folks are right on the front line.

Let me take you left to right. Sheriff Smith, we would be delighted to hear from you, tell us about Orangeburg. We heard about your good work earlier this morning from all of the witnesses involved, the U.S. attorney, of course, Mr. Stewart, our chief of SLED, the FBI, and everything else. We hear the Governor's RAID program is working in Orangeburg, but you go ahead and tell us what we ought to know and hear from you.

Sheriff **SMITH**. Senator Hollings, Senator Rudman, thank you. You probably heard what I am going to say already this morning, but the nature of the drug problem as we face it in South Carolina, especially in Orangeburg County, is an influx of outside interests migrating from Florida, New York City, Washington, DC, and Atlanta, GA. We have four higher institutions of learning in our county, which brings a great influx of young people for 9 months, and certainly the year round with summer school. This makes for a ready-made market of additional people and citizens in our county other than what would ordinarily be there without the institutions of higher learning.

We have addressed this problem with street sweeps such has been publicized in Los Angeles and Miami and on television. We have run undercover operations, intelligence gathering operations which we follow with search warrants. The problem we have in Orangeburg County, and I am sure in a lot of other counties in the State of South Carolina, is a small force of deputies to work with. In my case we have 1,107 square miles, right at 90,000 to 100,000 people that are full-time residents, and we try to operate 24 hours a day, 7 days a week with about 40 to 45 men. It's very hard to do this with the limited resources we have. We also face the problems of once we put a man working drugs and he makes a few buys in one area of the county, he is known all over the county because the drug dealers migrate back and forth from one end of the county to the other and then we don't have any new faces to put on the street to do any undercover work.

The needs in drug law enforcement in Orangeburg County are twofold, and I am sure you hear it day and night—money and manpower. These are the only two ways to attack the drug problem—money and manpower—and cooperation with all State and Federal agencies.

We have great cooperation between the Federal agencies and local law enforcement in Orangeburg County. The only problem that I have run into with the Federal agencies is when we had a large drug bust, if you will, a seizure and an 18-month undercover operation involving the DEA in Orangeburg County. Some of the State men were helping us, and it lasted about 18 months. During the operation, the DEA ran out of money and had to park some of their automobiles. This was very detrimental to our operation at that time. We managed to survive it and make do, but for a certain amount of time until the new budget came out, they didn't really have money to come back and forth from Columbia to Orangeburg to help us. We managed to do it by picking them up and meeting them in certain places and by getting other State agencies involved.

But we need more money such as the additional money that has been appropriated for the State of South Carolina to be administered through the Governor's office in South Carolina for surveillance equipment for small jurisdictions, and more money for personnel to work nothing but drugs and concentrate on it. And, I greatly think more money for the DEA in the State of South Carolina to enable them to assign more agents to the street so that they can lead us in the right direction with training and coordination between Columbia, Sumter, Williamsburg County, Winnsboro County, Fairfield, wherever we work. The bottom line again is money and manpower, and as sheriff of Orangeburg County, this is what I would appeal to your subcommittee for—for the whole State of South Carolina.

PREPARED STATEMENT

Senator HOLLINGS. Very good. We will insert your statement in its entirety in the record at this point.

[The statement follows:]

STATEMENT OF C.R. SMITH, JR.

The nature of the drug problem as we face it in South Carolina, especially in Orangeburg County, is an influx of outside interests migrating to this area from basically south Florida, New York City, Washington, D.C., and Atlanta, Georgia. The influx of out off state college students in Orangeburg County (we have four colleges) produces a ready market. The other factors seem to be the ease in which they can travel in the geographic area of South Carolina with the interstate highways, two of which intersect in Orangeburg County, and the probability of lesser law enforcement manpower-wise compared to larger cities.

The efforts to address the problem are drug sweeps such as those publicized greatly in Los Angeles and the Miami, Florida areas; undercover operations; and intelligence gathering with search warrants to follow. The situation for most law enforcement agencies in the smaller areas is that after a short time in the area the dealers seem to learn rapidly the identity of law enforcement officers and the vehicles that they use, etc. This places a hardship on local law enforcement as they do not have a multitude of manpower to keep putting new faces on the street or keep a number of informants on the street that the dealers do not recognize. There is a great deal of cooperation between the federal agencies in South Carolina, but their lack of numbers create problems too.

The needs of law enforcements in South Carolina, I think, would be additional manpower and the coordination of efforts between several agencies which would have to be funded from some source. With the President's new program of allocating certain moneys to fight the drug problem, moneys will hopefully be used to assist local law enforcement as well as Federal agencies such as DEA and U.S. Customs, who are already working drugs. The DEA, especially, needs to have additional resources. In our area the Columbia Office of DEA has eight agents for 33 counties. This number of agents is nowhere close to the number needed to coordinate the drug program much less lead and direct local agencies in substantial undercover operations. It takes time, money, and manpower to target the major dealers that are importing. I think that with a combination of more money for local law enforcement to purchase surveillance equipment, hire more people dedicated to the drug war, furnish the officers with equipment, such as vehicles and weapons, that at least equal the equipment used by the drug dealers, and increase the manpower and equipment of the Federal agencies such as the DEA, the Federal agencies could coordinate the areas with the local law enforcement agencies and benefit all concern. The Federal law officers in the DEA in South Carolina last year did not have enough money budgeted to allow them to even operate their automobiles during undercover operations we were already involved with at that time.

In summation the problem is continuing and increasing as they find the ease in which they can enter the state and set up operations. It is going to take a combination of increased manpower, increased Federal participation along with local law enforcement cooperation (which we have now) and enough manpower and equipment to work programs from Federal to local levels.

STATEMENT OF HON. LEROY I. MONTGOMERY, SHERIFF, FAIRFIELD COUNTY SHERIFF'S DEPARTMENT

Senator HOLLINGS. Sheriff Montgomery, tell us about Fairfield.

Sheriff MONTGOMERY. Senator Hollings, Senator Rudman, I truly appreciate the opportunity of appearing before this subcommittee to discuss the issue which is vitally important to the citizens of Fairfield County. As most politicians, I am going to make you a promise, what I am going to say is going to be short and to the point, but Fairfield County is one of the largest counties geographically in the State. We are 750 square miles. We have two recreational lakes on each side of us, west and east border. We have five major highways coming through Fairfield County. Our needs are manpower and money. We are poorly manned.

Like most other counties, we don't have the manpower. We are sitting right in the middle of Charlotte and Columbia. The State and the local agencies have been real good to us and the Federal agencies have been real good, but to combat this situation, I feel like we are going to need to work closely together and have better plans, better equipment, more money, more manpower. Thank you, sir.

PREPARED STATEMENT

Senator **Hollings**. Very good. We will place your statement in its entirety in the record.

[The statement follows:]

Statement of Leroy I. Montgomery

Senator Hollings, Senator Rudman, I truly appreciate the opportunity of appearing before this subcommittee to discuss an issue which is vitally important to the citizens of Fairfield County.

Our county is one of the larger counties in the state, yet we have a relatively small population. Much of the county is sparsely populated with the land devoted to farming and timber. Given the large, sparsely populated area, the five major highways transiting the county, the two large recreational lakes in the county, and our location between the metropolitan areas of Charlotte and Columbia we are highly vulnerable to individuals who find Fairfield County an attractive area to pursue their illegal drug activities.

During the ten years I have been Sheriff I have seen an alarming increase in the level of illegal drug activity in the county. Of even greater concern is the fact that much of this increased activity involves our school aged children. This is why one of the most important aspects of fighting illegal drugs must be education. However, we need to educate parents and other adults as well as children. I believe that the majority of children who become involved with drugs at an early age do so because they have been exposed to drugs in the home and in their neighborhood before they reach the third or fourth grade. Tolerance of drugs in the home and neighborhood, and especially use of drugs by parents and/or older siblings sends a terribly powerful message to young people that drugs are OK. Somehow, we must gain the active, aggressive, support of parents, teachers, clergy, and the community at large in sending another message—drugs are not OK. Once the good people of the community become sufficiently enraged about this problem, they can drive the dealers out of business.

Coupled with an effective education program we must also have an aggressive enforcement program. In this regard, I believe strongly that enforcement must attack both supply and demand with equal vigor. To help us in this effort we need tough laws, backed up by tough sentencing so that whatever the profit that may be gained by trafficking in drugs, it will not be worth the risk. We are fortunate in South Carolina that our legislature recognizes this problem and is considering legislation to help us. We are also fortunate in that we enjoy a high degree of cooperation among local law enforcement agencies throughout the state as well as support from Federal and State agencies. We must have a well coordinated enforcement effort that will put the traffickers out of business not merely force them to move from one area of the state to another.

Senators, I am sure you are well aware that the programs we are discussing are expensive. I do not believe, therefore, that the taxpayers at municipal or county level nor even statewide can bear the burden of funding such an effort by themselves. Consequently, we are going to need help from the Federal level if we are to be successful. While we have heard much discussion of appropriations by the Congress to fund the war on drugs, we have seen very little help trickle down to the local level where the war is being fought. You can help us by developing a system for funding and supporting this effort that is simple and which will ensure that the support gets down to the agencies needing it. The process does not have to be complicated. For example, I have read that the military is overstocked with such items as field uniforms, yet I cannot afford to buy field uniforms for my men to wear when they are staking out a marijuana field. Why not make these items available to local law enforcement? I am sure that there are many areas where such assistance could be made available. By making equipment and/or funds available through a simple, uncomplicated system, we will be able to obtain the help we need to wage this war.

Again, I truly appreciate the opportunity of appearing before you today to discuss this vital issue. On behalf of all of the citizens of Fairfield County I want to thank you for the support you have shown for law enforcement. With your help and the continued support of the good people of South Carolina I believe we can begin winning this battle. Thank you.

STATEMENT OF ROBERT A. WILBUR, CHIEF, COLUMBIA POLICE DEPARTMENT

Senator HOLLINGS. Chief Wilbur.

Chief WILBUR. Senator Hollings, Senator Rudman, again I want to thank you for taking time from your busy schedules to hear what we have to say to you in relation to problems that we encounter here in the city of Columbia. Drugs and drug-related crimes in Columbia have reached a level that affects all of our citizens. This is nothing new to you because you know that it affects citizens throughout the United States. As we attack these problems on a daily basis, we find that it's a never-ending struggle and the lives of the people who live in our neighborhoods are greatly affected to the point that most of them move out of neighborhoods where drugs are openly sold and bought, and it's difficult for an agency, even as big as ours, and we think we're big for the State of South Carolina. We have 218 sworn police officers, and, of course, we can only devote a certain number of police officers to fighting drugs.

We find that once drugs are sold in a neighborhood, the neighborhood goes into a state of deterioration. People move from homes and very quickly these houses are vandalized. They are used for drug sales. They become known as crack houses. They are many times victims of arsonists, and as a result, the entire neighborhood becomes a slum, and when we go in to work in these areas, we are able to control the drug activity for a period of time, but our problem is that once we clean up an area it's difficult for us to devote the manpower to maintain the stability that we need to have to put in that area in order to lure the people back into the neighborhood who are going to be good law-abiding citizens. I think that is one of the big problems we have, not only in Columbia but in other areas too.

I think you have heard this all day long, and I have heard it from the two sheriffs that have already spoken—money has to be made available to fight drugs, and I think on the local level it's most important. Of course, I might be prejudiced. I am looking at it from our point of view, but I think if we devote our manpower, our resources to fighting drugs here on the local level and then maintaining a level that people can be assured that crime, drugs, housebreaking and all other criminal activities will not return to that community, then I think that we can see some light at the end of the tunnel.

We have got to let those people who are dedicated to a life of criminal activity know we are not going to tolerate lawlessness, and we have got a commitment to the people in our community to make all areas in the city of Columbia safe for them to live.

Another area of concern is that of young people, juveniles, who are becoming involved in the drug activity. We have programs that we started such as DARE. We are in two schools right now on a regular basis with the DARE program. We are funding this along with the school district and we certainly would like to see that program extended to all the areas in the city of Columbia, all schools in the city of Columbia. Of course, budget restrictions forbid that.

Our crime prevention officers spend a great amount of time in the communities in all parts of our city in order to work with people who have problems with not only drug activity but with other types of crimes. It becomes difficult at times because the community depends on law enforcement and they look to us to solve all problems, and we just can't do it. We have got to have resources to get in there and help the community become involved with their problem so that they can help us solve their problems and I think the day has come when we need to become united in our efforts, community law enforcement working on this problem.

Again, I want to say how much I appreciate the efforts of the Federal law enforcement agencies as well as the State law enforcement agencies, as well as the county who help us anytime we have any type of drug operation. We depend on outside resources. If that wasn't available, we couldn't get it done, and we are very thankful for the cooperative efforts we have in all of these agencies.

We feel that another project could be started here in Columbia if resources were available, and we are looking to start that program. That is known as the PAL program, Police Athletic League, where we get involved on a community level with young people who have nothing to do between the hours that they get out of school and the hours their parents, who are working parents, get home. I think that will become a reality, but it will again be limited because of limited resources. I would like to expand on that as much as we possibly can.

But, again, let me say to you, to accomplish our goals, which are ambitious to say the least, will cost money. Dollars that we, on a local level, do not have. With your help you can be assured that we can make an impact and it will be felt, not only in Columbia but throughout the State. Thank you very much.

Senator HOLLINGS. Thank you, chief.

STATEMENT OF HON. THOMAS R. MIMS, JR., SHERIFF, SUMTER COUNTY SHERIFF'S DEPARTMENT

Senator HOLLINGS. Sheriff Mims.

Sheriff MIMS. Senator Hollings and Senator Rudman and other members of your subcommittee, I thank you for the opportunity to allow me and the other law enforcement officers to appear before you today and express our concerns and views concerning the drug crisis that we in this country face today.

I, like these other officers, feel that cooperation between not only our local agencies, the city, and county law enforcement departments, but on the State and Federal level as well, is paramount if we are to be effective in fighting the drug war that we are waging in this country today. I am also encouraged by the role that the military is taking in their interdiction of drugs as they come into this country, as well as the steps that are being taken now to stop the exportation of drugs and chemicals that can be used in the manufacturing of cocaine in foreign countries.

There are two main topics I would like to speak to today, and I will not go into the money situation because I think we all realize we cannot do anything to be successful in our fight without the proper financing or the manpower to carry those things through. But, the two areas I would like to speak to are enforcement and education.

I think there is a need in this State for a statewide repository of information concerning drug intelligence to be shared with all law enforcement agencies on all levels concerning suspected drug traffickers and other information concerning the types of drugs and the amount that are flowing into the county and into the State. We in Sumter County in 1978 created what we called a metro drug enforcement unit. It was an idea that was not new at that time, but certainly for our county it was the first. We combined the city and county law enforcement agencies in one unit to fight the drugs in that county, and since taking office in 1989, we have put that unit back together and are now operating in a combined effort.

I think that not only on the local level, but maybe State and Federal as well, to maximize the minimum amount of dollars we have at our disposal we need to combine those agencies. We have in this State a RAID team whose primary goal is to fight drugs and they certainly help and assist the local agencies greatly. Without their help, quite frankly, I don't think we would be able to operate with the small number of finances and manpower at our disposal if we could not call on the Federal DEA and State RAID team to assist us with the expertise and sometimes the financing to carry through our drug operations.

I think that in the area of search and seizure, if we could have a relaxation of some of the requirements we have to meet, it would certainly make our jobs easier. For instance, to confiscate a vehicle now if it has marijuana in it, it has to have at least 1 pound before it can be confiscated. This might sound drastic, but I think we are facing drastic times, and I would like to see the State law go to a zero tolerance policy. If a vehicle has any amount of drugs in it, we should confiscate it on the spot. The alcohol, firearms and tobacco tax agents, if they find moonshine in a vehicle, it is confiscated on the spot and that is the end of it.

I also think if we had a no knock State statute modeled after the Fed's statute concerning serving of drug warrants, search warrants, that it would ease our job and make it a little easier for us searching places of business and residences. I think back in the early 1970's we in this country made a mistake when we created a simple possession category for marijuana. Prior to that time, possession of any amount was punishable by 5 years and/or $5,000. With the simple possession category we sent a message to our young people that maybe possession of marijuana was not really a big deal after all and maybe not quite as dangerous as they had been told it was in the past. That sentence for simple possession is now $200 or 30 days.

We also need to be on the lookout for the creation and the designing of new type drugs that come on the scene. We are hearing about a drug called ice that is coming our way and I think we need to start preparing now to stiffen the laws in that area.

As we all know, drugs are not really the problem. It's when they come into the hands of people and the people manipulate or use or abuse them that it really creates the problem. We need to address that from our education side. As we deal with the youth of our country, we are looking at the leaders of tomorrow. We now have in this State an excellent program that is called DARE, drug awareness resistance education, aimed at the fifth and sixth grade level school children. I think we need to go beyond that to reinforce what they have picked up in that age group and go to the 10th and

11th grade and maybe call it a double DARE, or whatever name might be appropriate. I am very excited and encouraged by what I see about the DARE program.

Law enforcement roles are changing rapidly and drastically in this country and we need to become more proactive and less reactive in our role. We need to expand our neighborhood crime watch programs to include a drug watch program to reach people, to educate parents and grandparents alike as to the dangers of the drugs, and we as an American people need to realize that we are slowly being brought to our knees by the scourge of drugs as they come into this country.

The users of drugs are financing the drug lords, the cartels, and others that operate within the drug culture. And on the flip side of that coin, we are also spending and putting millions of dollars into law enforcement efforts and rehabilitative efforts, and to say nothing of the cost of this country to our citizens of burglaries, robberies, and deaths that are caused by these drugs.

We also need to reevaluate our spirituality. We are no longer the God fearing Nation that we once were and we can see this in the moral decay that is taking place around us daily. Our quality of life is being greatly affected. These are drastic times in which we live and those of us in places of leadership and responsibility must be willing to take drastic measures if we are going to win the war against drugs, and I believe that with the combined effort and by the grace of God that we can do it. Thank you, sir.

PREPARED STATEMENT

Senator HOLLINGS. Thank you, Sheriff Mims. We will insert your statement in the record at this point.

[The statement follows:]

STATEMENT OF HON. THOMAS R. MIMS, JR.

Thank you for the invitation to appear before your subcommittee. As the present Sheriff of Sumter County and former Deputy for seventeen years with fourteen years first hand experience in the Drug Enforcement area, I am pleased and honored to share with you and the committee my views concerning the drug crisis the people of this great nation face.

It is my belief that all levels of government and enforcement agencies must cooperate if we are to have any impact on the escalating drug crisis. I am encouraged by the involvement of the U.S. Military and the fact that we are beginning to look for ways to stop the exportation of chemicals used in the manufacturing process to make cocaine.

I would like to address two areas that are paramount in effectively fighting the drug war: enforcement and education.

Enforcement:
There is a need for a state-wide system to collect and disseminate information on drug traffickers. Presently, each local department gathers information, but rarely shares it with another agency. We tend to become to "turf" minded and sometimes suffer from "tunnel vision" failing to see the overall picture. If we are to raise the level of our effectiveness and efficiency, we must combine or consolidate law enforcement agencies.

Search and Seizure:
I would like to see the laws concerning seizure of property, especially motorized vehicles, relaxed. It would be helpful to have the same seizure procedure as the Alcohol, Firearms, and Tobacco Tax agents; if a vehicle has contraband liquor (moonshine) in it, the vehicle is forfeited on the spot. Also, the weight of drugs needs to be reduced or go to a zero tolerance for seizure purposes. At present, a vehicle must have one pound or more of marihuana in it before it can be seized.

The requirement to announce when serving a search warrant for drugs needs to be eliminated. The Feds. have a no-knock statue: why not at the State level.

Sentencing Penalties:
I believe a mistake was made back in the early 70's concerning marihuana when a Simple Possession category was established. Prior to that, possession of any amount of marihuana, upon conviction, was punishable by serving a five year sentence or paying a $5,000.00 fine or both. In my opinion, we sent a message to our youth that possessing a small amount of marihuana was not that big of a deal. We need to be prepared for the influx of the drug "ICE" and have stiffer penalties for this drug than we now have for the methamphetamines.

Education:
This is where we need to pull out all the stops. It is imperative that we reach our youth with the correct information concerning the use of drugs. They are our future; the leaders of tomorrow.

The Sumter County school systems, with the aid of law enforcement, city, county, and military, now have the Drug Awareness Resistance Education (D.A.R.E.) program in every school in the county. I am excited and encouraged by the content and effect, to this point, of this program. It is directed toward fifth and sixth grade students. I would like to see a similar program directed toward the tenth and eleventh grade students, maybe call it "Double D.A.R.E." As law enforcement professionals, I believe we must look beyond traditional roles, become more proactive and less reactive to the problems we face in today's rapidly changing society.

In addition, continue to expand and encourage the neighborhood Crime Wath programs to include a Drug Watch program to educate parents and grandparents of the signs and symptons of drug use. Organizing neighboorhoods block by block working with the civil organizations and churches to become more involved in their homes and neighborhoods and with their own families, and put forth a united front as we wage war against drugs.

All of these efforts will require the support of all the people. It will require a super human effort from a physical, spiritual, and financial standpoint.

The American people have not yet realized that the use of drugs is bringing our great nation to its knees physically, spiritually, and financially. Physically, millions of dollars are lost every day because persons are unable or unwilling to work because of their addiction to alcohol or drugs.

Spiritually, it is said that in America, 167 million people are unsaved. They have not accepted Jesus Christ as Lord and Savior. We are not the God fearing nation we once were and it can be seen in the moral decay that is slowly overtaking us. We have become too liberal in our homes, schools, adn churches when it comes to taking a stand and taking the heat for what is right.

Financially, the Americans who use drugs must realize they are financing the drug cartel, the drug dealers who have at their disposal all the money they need to buy protection from other drug barons, the law, and politicians to avoid being caught. Millions and billions of dollars are flowing from the American users to the dealers.

We are spending billions for law enforcement and rehabilitative purposes while losing revenue from persons not working as a result of their addiction. These expenditures are draining our financial resources which we can not long afford.

These are drastic times in which we live and those of us in places of leadership and responsibility must be willing to take drastic measures if we are going to win the war on drugs. I believe that with a combined effort and by the grace of God, we can do it.

Senator **Hollings**. I think we ought to put in the record, the following chart which illustrates the increased resources we have provided Federal law enforcement agencies to fight the war on drugs.

SELECTED DEPARTMENT OF JUSTICE AGENCIES

[Dollars in millions]

	Fiscal year—		
	1989 enacted	1990 enacted	1991 request
DEA	534	617	791
FBI	1,439	1,551	1,729
INS	822	850	894
U.S. marshals	205	239	290
U.S. attorneys	460	564	694
Prison:			
Construction	580	1,397	374
Salaries and expenses	952	1,139	1,372
Drug grants	150	445	490
Total Department of Justice	6,690	8,606	8,971

Note.—OCDE dollars included

So you can see here that we are trying our best at the Federal level to increase funding, and, yet, all my local friends are still talking even again more money, and I know you are genuine and sincere and I agree with the need.

DRUG EDUCATION

I take it that we have got to really put in a comprehensive drug education program, not only for the little children in the schoolroom about the danger of drugs, the DARE program and others, but we have to put in a general education program over the State in the civic clubs and otherwise to teach them about the dangers of drug use.

I will never forget in the hunger program I talked to a rotary club. They thought I had gone goofy, saying, "How are you going to feed the hungry? If you give them something to eat, they will never work," and all that kind of stuff. I had to go around and show that a good bit of the mental retardation, the flunking out of school, back down into the ghetto with kids getting into mischief and into crime, that it was cheaper to feed that child than it was to jail that man. And, we need to get started at early ages. Just like fighting hunger, we are fighting drugs at the local level, at the early stages and ages, the front line, so to speak, to apply those moneys. Yet, we are still behind the curve, aren't we? You have given me some interesting ideas.

I think some suggestions—like those from Sheriff Mims, relate to State laws and we will pass them on to Speaker Sheheen, and I am confident the Governor will know about them. You have to have at least a pound before you can qualify for a search and seizure on a vehicle. The no knock statute, the simple possession, that was the trouble back in the early 1970's

On the DARE program, if we could extend it—you call it double DARE—to the 10th grade, and create a drug watch program rather than just crime watch. You think this would help in our war on drugs? We are hearing from every witness that the majority of the crimes involve drugs.

NEIGHBORHOOD DRUG WATCH

Sheriff **Mims**. I think we have the vehicle in place to do this through our neighborhood crime watch programs. There was some concern in our county to create a new program called drug watch, and we felt that we already had that vehicle there in the neighborhood crime watch, so we were going to combine the two, revitalize it and make it a vital part of it.

Senator **Hollings**. You think it's realistic?

Sheriff **Mims**. Yes, sir.

Senator **Hollings**. Problems associated with drug abuse have permeated so many families, friends, workers, businesses, and otherwise, that I wonder, just as a practical question, are people willing to rat on their neighbors?

Sheriff **Mims**. Yes, sir; we had some neighborhood areas in our county, as Sheriff Smith had in his, and I am sure every county in the State has the same thing. There are certain little pockets where they seem to congregate and more or less, I don't like to use the word they take them over because I don't feel like we lost control in that area, but the people that lived in that neighborhood were actually afraid to come out of their houses because of the drug dealers in the street. It was about like a drive by wholesale drive-in type situation. They would drive by and two or three dealers would run up to the car to sell the drugs. The citizens got involved in it and got behind law enforcement and demanded something be done, and it was through the help of our department and the State's RAID team that we were able to move the drugs out.

Senator **Hollings**. And then it opens our eyes when Chief Wilbur talks about how law enforcement actually creates slums. Because if you are able to clear out the pushers and clean up the crack houses and everything else, then you have an empty slum and face the difficult task of attracting citizens back into that particular neighborhood?

Chief **Wilbur**. Senator, you know a lot of money is devoted to rehabilitation, community development, and a lot of similar programs, and we feel like we ought to be part of that. Once you start this revitalization of a neighborhood, I think we need to maintain it. But again, it takes resources, and that is what we are talking about—you can't refurbish or revitalize a neighborhood if it's going to go right back into the type of area that we just got rid of. So those are the types of things that concern us here in the city.

DEA RAN SHORT OF MONEY

Senator **Hollings**. Sheriff Smith, you certainly have furnished us with the weaponry for when we get back to Washington and look at these budgets. We are constantly asked why do you have hearings at the local level? Here we think DEA is making money and it's not costing us anything and we're actually recouping more from the seizures and sales of those seizures in the overall budget. And, yet, you tell us of a case, and I don't doubt it for a second because we do have very limited DEA resources assigned to South Carolina, but you say right in the middle of the case they ran out of money and you had to wait till the next fiscal year before you made the arrest?

Sheriff SMITH. No, sir; we made the arrest. It really did not stop the operation, but what happened is their appropriations ran out for that time of year and the agents that were assigned to our area had to park their automobiles for 2 or 3 days a week because they didn't have enough money assigned to come down to that area. They would get another automobile and we made arrangements and we worked it out, but it's one little small item in a lot of areas, and I certainly don't have an inner working knowledge of DEA, but I just happened to know of that case. I called the agent and he said, "I have to park my cars. We have to take some of our cars off the road." The head man made another vehicle available to him, but instead of having—well, I don't think they have but 10 agents in the State of South Carolina, and at that time they had one assigned to Orangeburg and maybe he had to park 3 automobiles out of the 10. I don't know exactly what the situation was, and we made arrangements to bring him down, but to me to believe that the Federal Government couldn't see or see how important somebody like the DEA is on the firing line, they are on the street level, more so than any other Federal agency. Even though we have cooperation from Customs and the FBI and every other Federal agency, we can get all the cooperation we want in South Carolina, but when it comes down to your street soldier in drug enforcement, it's the DEA.

Senator HOLLINGS. And, of course, they and you are putting your lives on the line and then to run out of gas is just unforgivable.

Sheriff SMITH. It seemed like it would have been to me, but that's the situation. Even though about the end of the budget year sometimes I run out of gas in my sheriff's budget, but we work it out. They always appropriate more money for gasoline because they want to keep the cars riding, but just that one instance seemed to me that it shouldn't have happened. You say there is a good bit more money being appropriated, and we appreciate it in local law enforcement because the more DEA agents you have and the more money the Federal law enforcement gets toward drug enforcement, we are going to get the help also and we know that.

Senator HOLLINGS. You have given us a better feel for the whole scope of this thing. This is far bigger than even some of us who have been working it realized.

Senator RUDMAN. As you were talking, sheriff, I was looking at the national drug control strategy. I was looking at the money that we have spent, and I hear stories like that and it's not the first time I have heard it. We have some real serious management problems somewhere. We spent $6 billion in 1989. I don't know about the State of South Carolina, but that would run a lot of our State government in New Hampshire for a millenium, $6 billion. We spent $9½ billion in 1990. We are going to spend over $10 billion in 1991, and I sometimes think in listening at hearings like this, that we sometimes get our priorities a little fouled up.

I agree with you that we ought not to allow those kind of things to happen. They have happened, not just here but in other places.

So, we are going to chat with some people about that and see if we can make sure we get the right amounts in those areas where the people in the field are operating. It's interesting; I have never noticed a headquarters to run out of money in any Federal agency. Ever notice the headquarters to run out of money? Ever notice the dining room of the Cabinet Secretary to run out of money? Ever notice the limousines shut down in Washington? It's always out in the field that the pinch comes and that is just another example of that.

Chief Wilbur, did you say that you had 218 officers here in Columbia?

Chief **Wilbur**. Yes, sir.

Senator **Rudman**. What is the population of the city? I am talking about the city itself, not the metropolitan area, but the city.

Chief **Wilbur**. We operate on 107,000 in population.

Senator **Rudman**. This is, what, Richland County?

Chief **Wilbur**. Yes, sir.

Senator **Rudman**. And how many officers does the county sheriff have in this area roughly?

Chief **Wilbur**. He will pretty well match the number that we have.

Senator **Rudman**. What would the population of the county be including Columbia?

Chief **Wilbur**. I don't really know, Senator.

Senator **Rudman**. Is that a fairly typical staffing for a city of 107,000, 208 officers? Are you understaffed locally? I am looking at the number for another reason.

Chief **Wilbur**. The workload that we measure, as you know, the analysis of what we do on a daily basis, and it definitely is not. We just have more to do than we can get around to at times. So that prevents us from throwing more resources into one area. It's like robbing Peter to pay Paul.

STATE DRUG GRANTS

Senator **Rudman**. I address this to all four of you gentlemen; there are specific limitations presently on our funding and so forth on how Federal funding goes out and goes into a State to the Governor's office to law enforcement agencies. Do you see any of that money at your level, chief? Let me ask you first directly.

Chief **Wilbur**. Very little, and if I might address that situation. Many times the match is prohibitive for us to even apply for because if we apply for $100,000 and you have a 50/50 match, certainly I could be using the $50,000 at the time that I applied for it, you have to understand that, or even a 25 match, so you can understand where that puts us.

Senator **Rudman**. Do you have any money other than the assistance you get from Federal agencies—I will ask Sheriff Mims, Montgomery, and Smith—do you have any direct money that has come into your departments from Federal drug grant money at all?

Sheriff **Smith**. We have not yet. We have on application now money for the DARE program to be implemented in our county and for several drug officers to operate, but we haven't received any direct Federal money for personnel. We have for a few pieces of equipment.

Senator RUDMAN. Sheriff Montgomery, could you answer that for me?

Sheriff MONTGOMERY. We haven't received any in our county, any Federal money.

Sheriff MIMS. We have received a very limited amount, Senator. We also have the problem with matching the amount, it creates a problem for us, but we have received some for some manpower and some equipment needs.

Senator RUDMAN. If the grant program were such that with some increased funds more of it came through the State and out into your sheriff's departments, what would your priority be for the use of that money? Let's start with Sheriff Smith. What would your priority be? How would you use that money?

Sheriff SMITH. If it started tomorrow, I would implement probably five officers, we have 10 middle schools in our county, to take care of the DARE program and start the education program, and I would probably start off—I have one man in my department, again 1,100 square miles and 100,000 people in the county—to work drugs full time, and I just pulled him out of the detective division and made him that officer.

Senator RUDMAN. He is in the DARE program now?

Sheriff SMITH. No; we do not do the DARE program now. We do not do it. We are hoping to get some of this money to start it. It's a good program. We like the program. We just don't have the manpower to put one or two officers to do nothing but that. I have not had in the past. Then, I would probably try to create a six to eight man drug enforcement team that would go around and work with the local agencies. We have 12, 13 small towns in our county, to work with those agencies and with the six or eight low cost housing projects we have in the county where drugs are becoming more and more of a problem every day.

Senator RUDMAN. When you apply for grant money, Sheriff Smith, to whom do you apply here in South Carolina?

Sheriff SMITH. To the Governor's office.

Senator RUDMAN. It comes through the Governor's office and the decision on how to make the cut is done there?

Sheriff SMITH. Yes, sir.

Senator RUDMAN. Sheriff Montgomery, would your priorities be similar to Sheriff Smith's or would they be different?

Sheriff MONTGOMERY. Senator, mine would be different because I'm in a unique situation. I do not even have a narcotics agent and my total department is only 30 men, and out of those 30 men I only have 18 road deputies. I do not even have a narcotics agent, a person that specifically would work drugs. That would be one of my first priorities to establish that, and also I'm very interested in the DARE program in our schools in Fairfield County, and I feel like our younger children, that we need to start educating them at an earlier age, in the fourth and fifth grade. I feel by the time they are in the fourth and fifth grade that the environment they have already grown up at home and been around, that we need to educate the adults also as well as our young children because they have already cultivated these habits. They grew up in them. By the time they get in the 10th or 11th grade it's hard then to start working with them.

Senator RUDMAN. Do you have the DARE program in any schools in your county at all?

Sheriff MONTGOMERY. No, sir; I don't.

Senator RUDMAN. Do the schools in your county have some other kind of drug education that you might be aware of? We will find that out from our next panel I am sure, but you are not aware of any?

Sheriff MONTGOMERY. No, sir.

Senator RUDMAN. Chief, what would your priorities be? I think you have stated them to some extent, but would they be different from Sheriffs' Smith and Montgomery?

Chief WILBUR. Basically we are high on the DARE program and I would like to expand that.

Senator RUDMAN. How many schools do you have it in now?

Chief WILBUR. In two right now, but we only have one officer doing two schools, and this is our second year and we believe in the program.

Senator RUDMAN. Sheriff Mims.

Sheriff MIMS. My goal would be to expand the DARE program. I took an officer out of our hide, so to speak, in 1989 and his full-time duty is to work the DARE program. In our county we have three officers, one city, county, and one from Shaw Air Force Base and we are now in every school in our county, both public and independent schools. I have since designated another officer who has been trained and will work in the DARE program and in his regular assigned duty flip back and forth, but I would like to see more programs reaching our youth if we had the funds available.

DEMAND REDUCTION

Senator RUDMAN. Thank you very much for your answers. Mr. Chairman, it's very interesting, here we have four law enforcement officers and it just reinforces what many of us already believe. All of you obviously want to do your law enforcement work and you recognize there is a lot to be done there, but you also I guess recognize that you can't solve this program. Unless we can get people to stop using drugs, it will go on forever. You are going to need more police, more prisons, more everything, and you all believe I take it that if there is ever going to be an answer to this, it's through more education and just cutting off the demand for drugs. I guess you all agree with that, do you?

Sheriff SMITH. Yes, sir; I agree with that. The only thing I think most law enforcement officers, especially on our level who see it every day 24 hours a day, know that through education, the cutting off the demand for drugs can be the only answer to the problem. We waited so long, and I say we and I am including everybody, to start that it will probably be 15 or 20 years before we get to that point.

If we had the effort that we have, as Sheriff Mims said, when they lowered the punishment for simple possession of marijuana, and I don't know whether it was the flower children of the late 1960's or early 1970's or whatever, but if we had started then, we never would have reached this point in drug enforcement, the problem we have now.

Senator **Rudman**. You would be interested to know that the Federal attitude, which from the law enforcement point of view out in the field is kind of well accepted, had been a 70/30 split, 70 pecent on the supply side and 30 percent on the demand side and we are moving that closer now. We are closer to 50/50. Obviously DEA and FBI have major national problems and they need more funding as well, but a lot of us in the Congress are absolutely convinced the only way to get the lawn to stop growing is to stop watering it. Unless we can stop people from using drugs, some committee will be here 20 years from now and we will be talking about $90 billion for the war on drugs unless you cut it off. I appreciate your testimony. It's been helpful and I find it particularly interesting how you all feel about using the money. You would like to use it for education programs, which is what the police in my State tell me.

We are a bit ahead of you all down here in terms of the DARE program. We have been at it a little longer and they have been using more funding for the DARE program. I can tell you that it works. There is no question from seeing it in a number of New Hampshire schools, it works. I really appreciate your taking time to come over and talk to us this morning. I don't have any other questions, Mr. Chairman.

Senator **Hollings**. I really am impressed too, because law enforcement officers, I know they want more jails and stricter sentencing and everything else, but here all four are talking education, and there isn't any question when you get down here to the front line that education is what is really needed. Now, you have given me a thought, and you correct this thinking if you think it's in error. Let's say, Sheriff Smith, everybody needs what you indicate is sort of centralized coordinated expertise and help. If I had money to put on, let's say, 45 to 50 extra people, rather than giving the 46 counties 1 person extra per county, I would better allocate the 45 to 50 breaking it up between FBI, DEA, and SLED because therein you could use and draw on those as you get a case ready.

As I understand, Sheriff Smith, you had an important case over there, quite a break in Orangeburg County for which you are known. You didn't have that kind of expertise on it, you don't have that surveillance vehicle and everything else of that kind. We can't buy 45 of those. So we have to move that around. Is it the case that if I am going to try to put in extra money, it's better to try to put it at a centralized coordinated effort level to be called on by each of the sheriffs or chiefs of police, or do I just dissemble, in a sense, my effort by giving everybody one more?

Sheriff **Smith**. No, sir; I don't want one more, because if you gave me a drug surveillance van today, we would use it every night for probably a year and then it would sit up for 2 years and gather cobwebs, where Sheriff Montgomery could be using it. I think the idea of cooperation and centralizing efforts by all of the agencies involved wherein if we had a surveillance van, just using that as an example, and some night vision equipment that when we used it, and I will go back to the DEA being the ground soldier of the drug enforcement, they would know where the problems were. They would know if Chief Wilbur was having the same problem with the same crowd as I was and they would know where the most need would be. So I think we could give SLED a couple of units and give DEA three or four units in the State and the FBI a couple of units. You are talking about somebody being available 90 percent of the time you needed it, which is a heck of a lot better than 10 percent of the time now.

Senator HOLLINGS. Which, in a sense, is the best way to get a local grant to Orangeburg or Fairfield County?

Sheriff SMITH. Yes.

Senator HOLLINGS. We appreciate it very, very much. It's an important presentation for the subcommittee this afternoon and we thank each of you very much. We will be in recess for 10 minutes.

[A brief recess was taken.]

EDUCATION, PREVENTION, AND TREATMENT PANEL

STATEMENT OF HON. McKINLEY WASHINGTON, JR., DROP A DIME PROGRAM

Senator HOLLINGS. We are delighted to have William J. McCord, the commissioner of our South Carolina Alcohol and Drug Abuse Commission, Bishop Fred C. James. Bishop James, you come forward here, please, with that booming voice of yours, and Hon. McKinley Washington from the Drop A Dime Program, David Jameson of Lexington-Richland Alcohol and Drug Abuse Commission. Let me take Representative Washington first here. We might ask him questions because they are marking up a budget in the next building here. This crowd has got a triple A credit rating. They pay their bills down here.

Senator RUDMAN. Anything extra you can loan us, representative?

Mr. WASHINGTON. Sir, we are right now trying to find some money.

Senator HOLLINGS. Representative Washington, we appreciate your appearance and will be glad to hear from you.

Mr. WASHINGTON. Thank you, Senator Hollings and Senator Rudman. We are very happy to have you in the State of South Carolina and appreciate the opportunity to appear before this distinguished subcommittee. I am grateful for the opportunity to testify at this Senate Appropriations subcommittee drug overview hearing.

Specifically I would like to thank Senator Hollings, who was very much a part of the process that we got started in getting assistance for the Drop A Dime Program in South Carolina by getting some Federal grants appropriated to us. At this time we have the criminal justice department at the University of South Carolina [USC] and Benedict College and South Carolina State College working to implement what we call a three point program, the Drop A Dime Program, which is a public relations program. Darrell Jackson and others are assisting us in that particular aspect of the program, and also the research aspect of the program which is mainly being done by USC, Benedict, and South Carolina State College with Dr. Chisholm as the director of the program.

Our thrust is directly related to the black community in South Carolina. Even though we are looking at the total community, we are putting most of our emphasis in that particular area. At this particular time it is too early to say exactly what that research program might indicate, but we have sort of a good idea of what would take place because of the number of black males that are incarcerated in South Carolina and we know that a great portion of that, Senator, is related to drug addiction. Most of those crimes are drug related, and as a result, we feel that somewhere down the line we will discover that our concerns should be in the area of dealing with that particular problem as far as drugs are concerned.

Once the research is completed, it will provide us with information that has been unavailable. I want you to know that these efforts are supported by our speaker of the house, the attorney general, the chief of our State law enforcement division and many other citizens of this State. While the South Carolina Legislative Black Caucus appreciates the Federal Government's assistance in responding to the needs of America, we are also very concerned about the amount of substance abuse money coming into the State which has been earmarked for law enforcement activities, yet little, if any, money for education, prevention, and treatment.

On last Thursday, February 8, the State announced that the Government had earmarked $4 million for South Carolina to fight the impact of drugs. These funds represented a $1 million increase over last year's funding, yet not a penny was earmarked to communities to combat substance abuse. How can we be comfortable dealing with this problem from a State level when our hands are tied by having no funds available to help our constituents?

I realize that Hurricane Hugo had a devastating impact on South Carolina and it was necessary for the Federal Government and State government, the people of South Carolina, and this Nation to come to the aid and rescue of South Carolinians, I thank all who assisted us. Indeed this was an emergency, but the substance abuse problem is just as harmful and damaging as Hurricane Hugo and its effect. In December our substance abuse project committee met in Greenville, SC. The mayor of that city, William Workman, welcomed us and stated the work of our research project was one of the most important activities going on in this State. Further, he likened the drug abuse problem to Hurricane Hugo. He stressed that the differences between the two is the commitment given to Hugo and the lack of a defined plan dealing with the drug problem. He concluded that if we do not find answers to our drug problem, it will destroy our cities, our communities, children, and our lives.

The Legislative Black Caucus is not against beefing up a quality law enforcement response to the drug problem. We support Chief Robert Stewart's efforts and the State law enforcement division. They have been effective in their own way. We support the Governor's drug RAID team, but we recognize that law enforcement in and of itself is not enough. If we are to defeat this social disease in our communities, everyone must be involved, the richest, the poorest, blacks and whites, the educated as well as the uneducated.

Dr. William Bennett, the Nation's drug czar, observed in a Newsweek interview that it would take between 20 and 25 years to win the war on drugs. The question I ask is, if this is a war, then where is the declared battlefield? It cannot be our communities. It cannot be our schools. It cannot be our homes. It cannot be our churches.

The battle field is clearly not discernible, and it is at this juncture that the enemy is likewise not detectible. The enemy can be anyone, your father, your mother, your son, your daughters, and perhaps even your minister. Money is the root of this problem. All of the persons involved are involved because they want to make quick money and as much of it as they can. The drug lords know this and they know that the most vulnerable group is young, poor black males who want to wear gold around their necks, who want to have expensive sneakers and dress in expensive clothes.

These young males are recruited and provided an opportunity to make more money than they have ever seen. They are given guns, told to protect their turf and don't let anyone else take it from them even if it means killing somebody. On the streets of Charleston, SC, there are young, aggressive boys ready to kill and ready to die to make money from drug transactions.

It has been proposed by the commissioner of the South Carolina Department of Corrections that this State spend an additional $180 million for new prison construction with a 4- to 1-percent increase in department budgets to manage the new facilities. Right now, building prisons has become an industry for this State. There is one important fact we know about prison construction, when they are built, they are filled with prisoners. At the rate young black males are being locked up, we can anticipate the new prisons will reflect the old prisons and this cannot be tolerated in this State any longer.

You asked what the substance abuse is doing to this State's black community. I tell you that it is destroying lives, families, and the most precious resource we have, our youth. Yes; I come with the sense of urgency before you pleading for action by our national leadership. This problem is simply too great for the White House to be in a tug of war with our Federal legislators. There must be a direction provided by the top in order for the bottom to stand firm and confident that we will win this important war. Sadly, as of this day, this is not the case.

Senators, please allow me to offer a few suggestions that the South Carolina Legislative Black Caucus support as well as our research team. We need increased educational funds designed to educate our youth on substance abuse and establish substance abuse programs in our schools. We need more funds earmarked for community prevention programs. We need more research funds to study the social networking of the drug culture. We need more research funds to study the impact of Afro-American health as a result of substance abuse, more legislation to address the problem of TV violence and sex. The same effort should go into the movie industry. We need more legislation to curb alcoholic beverage commercials and billboards in our communities, and, yes, we need more available jobs for our young people. The kind of job that will give them the kind of money that they will not have to depend upon getting a roll from drug dealers. Mandatory law enforcement training programs dealing with emerging lifestyles of Americans, especially Afro-Americans, are needed.

The theories purport that Americans are vastly different from what they were 20 years ago, and law enforcement must recognize this in the scheme of their delivery of quality of services. We talked to a number of law enforcement agencies in Florence on Friday. They were talking about the DARE program that we ought to have in all of our public schools. These are the kinds of things we must deal with in order that we can educate our young people. We need much more than to use the phrase to "Just Say No" to drugs. It's going to take a whole lot more than that. We tell folks to say no, but it's difficult to tell a fellow to say no to a roll of money that a guy will come up and give to him to carry drugs to our young people in our schools, et cetera.

Senator, I offer my comments as positive indicators of the cruciality of substance abuse in South Carolina's black community and as the community as a whole. I hope my message and the messages of others will make a difference in Washington because that is where the action must take place in how the substance abuse issue will be addressed in America and in our beloved State of South Carolina. I often say that we look at Washington, DC, and what is happening on the streets of Washington, DC, and the killing and think about South Carolina as being the gateway to the South, and that is why we are concerned that we need to do something in South Carolina, and that is why the black caucus has been concerned about that, because if we don't do something to the gateway to the South, then we are going to have the same kind of drug war and the same kind of killing, not only in South Carolina but all the way down the coast, and it is important that we do something about it, not tomorrow, but yesterday. Thank you very much.

PREPARED STATEMENT

Senator HOLLINGS. Thank you very much. We will place your statement in the record at this point.

[The statement follows:]

STATEMENT OF HON. McKINLEY WASHINGTON, JR.

Senator Hollings and distinguished members of this Subcommittee, I am grateful for this opportunity to testify at this Senate Appropriations Subcommittee's drug hearing. Specifically, I would like to limit my remarks to the impact of drug abuse in South Carolina's black communities.

First, please allow me to convey the appreciation of the members of the South Carolina Legislative Black Caucus for your help in assisting us in securing from the U.S. Department of Justice, a grant to study substance abuse in South Carolina's black communities. The University of South Carolina's College of Criminal Justice is the respository for the grant and is working on this project in conjunction with the Criminal Justice Departments at Benedict College and at South Carolina State College.

It is too early to estimate any research findings on the problems of substance abuse in the black community; however, there is enough existing information and enough young black males in our state prison system who were involved in some aspect of substance at the time of their arrest to permit to discuss this issue with you this today. In fact, South Carolina's prison system population is roughly 61% black. A percentage that is telling and unacceptable.

Gentlemen, substance abuse has affected the black community of South Carolina so greatly that black leadership is expressing a lost with reference to what to do about the problem. That is why the "Drop A Dime on A Drug Dealer" campaign, sponsored by the South Carolina Legislative Black Caucus, has taken off in such a strong manner and has been so well-accepted throughout the State in general and in the black community specifically. It is offering an alternative that even our own state government is failing to provide. Once the research is completed, it will provide us with information which has been unavailable. I want you to know that these efforts are supported by our Speaker of the House, the Attorney General, the Chief of our State Law Enforcement Division and many, many citizens of this state.

While the South Carolina Legislative Black Caucus appreciates the federal government's assistance in responding to the needs of America, we are also very concerned about the amount of substance abuse money coming into the State which has been earmarked for law enforcement activities and yet little, if any, money for education, prevention and treatment.

On last Thursday, (February 8), the State announced that the government had earmarked $4 million for South Carolina to fight the impact of drugs. These funds represent a $1 million increase over last year's funding and yet not a penny was earmarked for communities to combat substance abuse. How can we be comfortable dealing with this problem from a state level when our hands are tied by having no funds available to help our constituents? I realize that hurricane Hugo had a devastating impact on South Carolina and it was necessary for the federal and state governments, the people of South Carolina and this nation to come to the aid and rescue of South Carolinians, and I thank all who assisted us. Indeed this was an emergency, but the substance abuse problem is just as harmful and damaging as Hugo.

In December our substance abuse project committee met in Greenville, S.C. The mayor of that city, William Workman, welcomed us and stated that the work of our research project was one of the most important activities going on in the state. Further, he likened the drug abuse problem to hurricane Hugo but he stressed that the difference between the two is the commitment given to Hugo and the lack of a defined plan for dealing with the drug problem. He concluded that if we do not find answers to our drug problem, it will destroy our cities, communities, children and our lives.

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Dr. William Bennett, the nation's drug czar, observed in a Newsweek interview that it will take between 20 and 25 years to win the war on drugs." The question I ask is: If this is a war, then where is the declared battle field? It cannot be our communities, it cannot be our schools, it cannot be our homes and it cannot be our churches. The battle field is clearly not discernible, and at this juncture, the enemy is likewise not detectable. The enemy can be anyone--your father, your mother, your son, your daughter and perhaps even your minister.

Money is the root of this problem. All of the persons involved are involved because they want to make quick money and as much of it as they can. The drug lords know this and they know that the most vulnerable group is young, poor, black males who want to wear gold around their necks, who want to have expensive sneakers, and dress in expensive clothes. These young males are recruited and provided an opportunity to make more money than they have ever seen. They are given guns, told to protect their turf and don't let anyone take it from them, even if it means killing somebody. On the streets of Charleston, South Carolina, there are young aggressive boys ready to kill and ready to die to make money from drug transactions.

It has been proposed by the Commissioner of the South Carolina Department of Corrections that this state spend an additional $180 million for new prison construction with a 41% increase in the department's budget to manage the new facilities. There is one important fact we know about prison construction, when they are built, they are filled with prisoners. At the rate young black males are being locked up, we can anticipate that the new prisons will reflect the old prisons and this cannot be tolerated.

You ask what the substance abuse is doing to this state's black community, I tell you that it is destroying lives, families and the most precious resource we have, our youth. Yes, I come with a sense of urgency before you pleading for action by our national leadership. This problem is simply to great for the White House to be in a "tug-of-war" with our federal legislators. There must be a direction provided by the top in order for the bottom to stand firm in confidence that we will win. Sadly, as of this day this is not the case.

Senator, please allow me to offer a few suggestions that the South Carolina Legislative Black Caucus supports as well as our research team. We need:

- Increased educational funds designed to educate our youth on substance abuse and to establish substance abuse programs in our schools.

- More funds earmarked for community drug prevention programs.

- More research funds to study the social networking of the drug culture.

- More research funds to study the impact of African-Americans health as a result of substance abuse.

- More legislation to address the problems of T.V. violence and sex. The same efforts should go into the movie industry.

- More legislation to curb alcoholic beverage commercials and billboards in our communities.

- Mandatory law enforcement training programs dealing with emerging life styles of Americans, especially, African-Americans. The theory purports that Americans are vastly different from what they were 20 years ago; and law enforcement must recognize this in the scheme of their delivery of quality service.

Senator, I offer my comments as positive indicators of the cruciality of substance abuse in South Carolina's black community. I only hope that my message and the messages of others make a difference in Washington, and in how the substance abuse issue will be addressed in America and in our beloved state.

Thank you.

DROP A DIME

Senator HOLLINGS. Thank you very much. That is a very moving statement. Representative Washington, let me publicly thank our colleague from New Hampshire. Senator Rudman helped in that 1989 supplemental when we got the $200,000 for the research program and for the pilot program of Drop A Dime. Can you tell us how the research is going? You haven't completed it, but what have you found out so far and what about the success or failure or otherwise of Drop A Dime?

Mr. WASHINGTON. Senator Hollings, the Drop A Dime Program has been very effective. Folks who have not involved themselves in the drug activities within their community as a result of the information that we have had and the information that we have disbursed within the community, those individuals, little old ladies who have been hiding in their homes and were afraid to even talk about the drug program, are now calling in to the police department, all of our law enforcement agencies across the State telling folks what is going on in their community.

A good example, this past week Dr. Chisholm was on a radio program and he was talking about the Drop A Dime Program and the commentator was talking about how important that was and how great it was and he wanted Dr. Chisholm to give him a number, and somehow he didn't have the caucus office number but he gave them our office number here in the building, and when my secretary and I got in the office, she was steaming because folks started calling into my office about that program, so it is very effective.

Of course, the research now is on the way, both USC, Benedict, and South Carolina State, those staff persons and people in the community have been talking to people and, hopefully, when that information is put together, it will be of benefit not only to South Carolina and to the legislature, but the entire Nation.

Senator **Hollings**. And the word can be preached through the church because that is the most effective arm you have. Dr. Chisholm, the record would show, is our former U.S. marshal and professor in the criminal justice department of the University of South Carolina helping head up this research program and we are pleased to have him here today.

DEMAND REDUCTION

Senator **Rudman**. I just want to tell you, Representative Washington, that was a very moving statement and very interesting in light of the testimony we had just before you got here. We had three of your county sheriffs and the chief of police of Columbia and I asked each of them who are in law enforcement what they would do in terms of priority if more Federal money in terms of block grants came to their particular law enforcement agencies. Each of them did not give the answer you might have expected 5 years ago, which would have been for more guns, more radios, more cars, more police. They all said they would like to do more with the DARE Program, with education programs, and, of course, that is exactly what we are trying to do in the Congress.

For the first time we now have the ratio of Federal money, this year nearly $10 billion of that money, we are trying to get more and more of it to a 50/50 ratio from the supply side to the demand side, which is what we believe. You said one thing in your statement that kind of struck me, and maybe Mr. McCord can fill us in later, but I think you said on February 8 the State got $4 million earmarked by the Federal Government through South Carolina to fight the impact of drugs, a $1 million increase over last year, and not a penny earmarked to communities to combat substance abuse. I don't understand that. Are you telling me that that all went for law enforcement?

Mr. **Washington**. Yes, sir.

Mr. **McCord**. We are going to get some, but it wasn't February 8.

Senator **Rudman**. So of this $4 million, all went to law enforcement?

Mr. **Washington**. That's correct.

Senator **Rudman**. Which, of course, is the Governor's right. One of the things we are trying to do at the Federal level is to truly allow States to make their own decisions and we figure all of you in this State have got enough know how with the political process to make sure the priorities are worked out here rather than have some bureaucrat in Washington decide how it should be spent. I agree with you completely, Mr. Washington, unless we can get those young kids in the schools early to understand what is happening to them if they use drugs, you are absolutely right, we will get nothing done. We will just spend more and more money on law enforcement. Law enforcement will tell us there is no way they can stamp it out. They can be the Dutch boy with his finger in the dike but they can't keep the ocean from flowing over the dike, which is what is happening. This Drop A Dime Program, explain how that works.

DROP A DIME

Mr. **Washington**. The Drop A Dime Program is simply—we have some brochures we have distributed throughout the State and on those brochures we have the telephone numbers of every law enforcement agency in the State, and what an individual could do if he would see some activities going on in his community, that individual can call either his local sheriff, local police office or the State law enforcement agency and report those activities without giving a name and without having to fear that someone would hurt them or do something to them. That information would be passed on to law enforcement.

We also have in that program, Darrell Jackson, who is sitting here behind me, of Sunrise Consultants Service, they have put together something similar to the public service announcement highways and dieways that you see on television. Within the next few weeks we will be running those ads with some scenes showing what will happen when an individual would get caught up in drugs, how they get killed, et cetera, and this too will be used as a public relations part of that Drop A Dime Program.

Senator **Rudman**. Of course, the bottom line as far as your testimony is concerned is we have to do much more in terms of education in the schools and we have got to do it early.

Mr. **Washington**. That is the bottom line.

Senator **Rudman**. That is your bottom line?

Mr. **Washington**. Yes, sir.

Senator **Rudman**. I take it that the Drop A Dime Program is working pretty well? I guess we would only have to ask your secretary over here to tell us that.

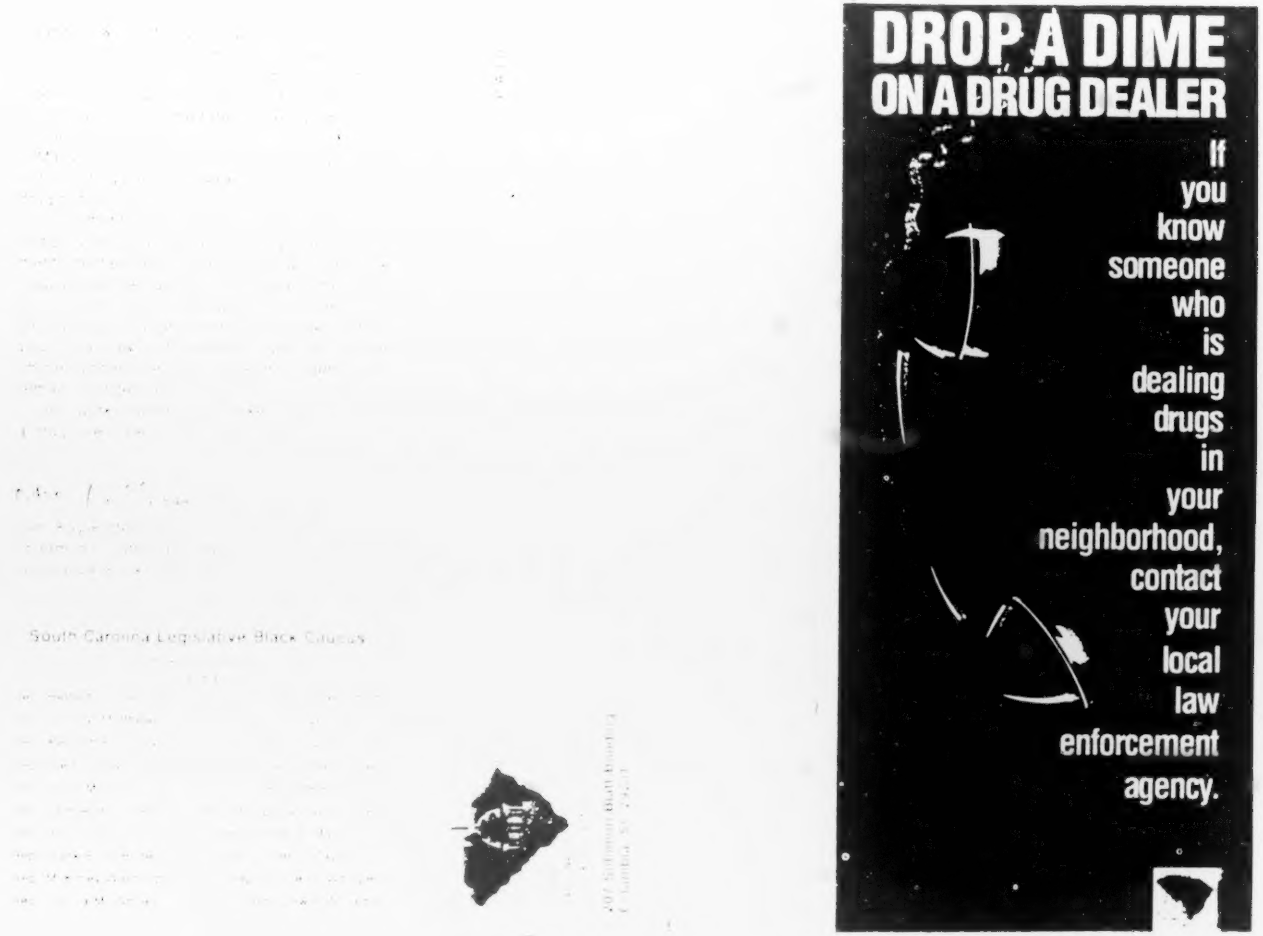
Mr. **Washington**. It's working real well and we have that kind of material in practically all of the schools in the State.

Senator **Rudman**. I appreciate your testimony. I understand you have a very busy day. We understand that as legislators. I just hope that we can get more of this money into education and into treatment because while we have got to put a lot of money into law enforcement, nobody doubts that, but we have to cut this off, and we are only going to cut it off by telling these kids they shouldn't use it and have them understand it.

Mr. **Washington**. What we are doing is putting it on the back end and we need to put it on the front end.

Senator **Hollings**. Representative Washington, your testimony and all the testimony that I have heard today impresses one with the very feeling there is no jealousy or one-upmanship in this particular drug menace and how we confront it, because while you attest to the Drop A Dime Program, the research, the education, you also are endorsing the Governor's RAID Program and SLED and all its endeavors on the law enforcement end as well. I find that permeates all the witnesses. They are very measured, very balanced in their opinions, and that tells me we have a real problem, because ordinarily everybody says you give me mine and I can handle it. It's bigger than all of us. We will include in the record one of the brochures. I have seen them. They are very effective. We thank you very, very much, Representative Washington. I know you have to get to that other meeting. Thank you for your appearance.

[The information follows:]



DROP A DIME
ON A DRUG DEALER

If you know someone who is dealing drugs in your neighborhood, contact your local law enforcement agency.

South Carolina Legislative Black Caucus

407 Solomon Blatt Building
Columbia, SC 29201

Sheriffs' Offices

(County, Town)	
Abbeville, Abbeville	459-2555
Aiken, Aiken	642-1761
Allendale, Allendale	584-2361
Anderson, Anderson	260-4400
Bamberg, Bamberg	245-2422
Barnwell, Barnwell	259-3083
Beaufort, Beaufort	524-2777
Berkeley, Moncks Corner	761-8190
Calhoun, St. Matthews	874-2741
Charleston, Charleston	723-6710
Cherokee, Gaffney	489-4722
Chester, Chester	385-5131
Chesterfield, Chesterfield	623-2101
Clarendon, Manning	435-4414
Colleton, Walterboro	549-1522
Darlington, Darlington	393-8181
Dillon, Dillon	774-2713
Dorchester, St. George	563-3181
Edgefield, Edgefield	637-5337
Fairfield, Winnsboro	635-4141
Florence, Florence	665-3061
Georgetown, Georgetown	546-5101
Greenville, Greenville	271-5280
Greenwood, Greenwood	223-1288
Hampton, Hampton	943-3271
Horry, Conway	248-6241
Jasper, Ridgeland	726-5583
Kershaw, Camden	425-1512
Lancaster, Lancaster	283-3388
Laurens, Laurens	984-2523
Lee, Bishopville	484-5353
Lexington, Lexington	359-8230
Marion, Marion	423-3131
Marlboro, Bennettsville	479-2851
McCormick, McCormick	465-2431
Newberry, Newberry	276-1500
Oconee, Walhalla	638-4111
Orangeburg, Orangeburg	531-4647
Pickens, Pickens	878-2421
Richland, Columbia	779-6100
Saluda, Saluda	445-2112
Spartanburg, Spartanburg	596-2646
Sumter, Sumter	773-1561
Union, Union	429-1612
Williamsburg, Kingstree	354-6381
York, York	684-8522

Local Agencies

City Police Headquarters

Abbeville	459-5832
Aiken	649-4121
Allendale	584-2177
Anderson	231-2277
Andrews	264-8222
Atlantic Bch.	272-6723
Aynor	358-3900
Bamberg	245-2462
Barnwell	259-3522
Batesburg	532-4408
Beaufort	524-3141
Belton	338-8448
Bennettsville	479-2821
Bishopville	484-5309
Blacksburg	839-2331
Blackville	284-2333
Bluffton	757-2263
Bonneau	825-3385
Bowman	829-2666
Branchville	274-8820
Calhoun Falls	447-8502
Camden	432-2424
Cameron	823-2145
Campobello	468-4545
Cayce	794-0456
Central	639-6381
Chapin	345-5444
Charleston	577-7434
Cheraw	537-7868
Chesnee	461-2225
Chester	385-2131
Chesterfield	623-2419
Clemson	653-2040
Clinton	833-2511
Clio	586-2211
Clover	222-9494
Columbia	(Info) 733-8415
	(Emer) 252-2911
Columbia Metropolitan Airport	794-3419
	or 794-3425
Conway	248-4266
Coward	389-2585
Cowpens	463-3201
Cross Hill	998-3973
Darlington	393-2831
Denmark	793-3421
Dillon	774-2421
Due West DAY	379-2385
Duncan	439-2664
Easley	859-4025
Eastover	353-2281
Edgefield	637-6611
Ehrhardt	267-8025
Elloree	897-2223
Estill	625-2114
Eutawville DAY	492-3519
NIGHT	492-7530
Fairfax	632-3222
Florence	665-3191
Folly Beach	588-2433
Forest Acres	782-9444
Fort Mill	547-2022
Fountain Inn	862-4461
Gaffney	489-8115
Georgetown	546-2597
Goose Creek	572-4300
Great Falls	482-2144
Greeleyville	426-2111
Gray Court	876-3482
Greenville	271-5100
Greenwood	223-2300
Greer	(Info) 877-6433
	(Emer) 879-2151
Hampton	943-3993
Hanahan	747-5711
Hardeeville	784-2233
Hartsville	383-3010
Heath Springs	273-9366
Hemingway	558-2424
Hodges	374-3111
Holly Hill	496-3811
Honea Path	(Emer) 369-2424
	(Info) 369-0532
Inman	472-2828
Irmo	(Info) 781-7050
	(Emer) 359-2522
Isle of Palms	886-6522
Iva	348-6191
Jackson	471-2227
Mullins	464-8291
Myrtle Beach	(Info) 626-9589
	(Emer) 448-3111
Newberry	276-7000
New Ellenton	652-7770
Nichols	526-2193
Ninety Six	543-3121
North	247-2101
North Augusta	279-2121
N. Charleston	554-5700
N. Myrtle Bch.	272-4000
	Ext. 209
Norway	263-4300
Jefferson	658-7800
Johnsonville	386-2626
Johnston	275-3334
Jonesville	674-5262
Kershaw	475-3765
Kingstree	354-5435
Lake City	394-5411
Lake View	759-2118
Lamar	326-5555
Lancaster	285-7484
Landrum	457-3762
Latta	752-5621
Laurens	984-3531
Leesville	532-4601
Lexington	359-8141
Liberty	843-9271
Lincolnville	871-6220
Loris	756-4000
Lyman	439-3453
Lynchburg	437-2505
McBee	335-6613
McColl	523-5222
McCormick	465-2150
Manning	435-8859
Marion	423-2121
Mauldin	297-5200
Mayesville	453-5555
Moncks Corner	761-8036
Mt. Pleasant	884-4176
Spartanburg	596-2013
Springdale	796-3160
Springfield	258-3152
Starr DAY	352-6935
NIGHT	352-6052
Sullivans Is.	883-3931
Summerton	485-4385
Summerville	(Info) 873-5107
	(Emer) 875-1650
Sumter	773-1561
Surfside Bch.	238-2621
Swansea	568-3366
Timmonsville	346-7212
Travelers Rest	834-9029
Trenton	275-4840
Turbeville	659-2000
Olanta	396-4414
Olar	368-2162
Orangeburg	531-4654
Pacolet	474-9504
Pageland	672-6437
Pamplico	493-5551
Pendleton	646-3666
Pickens	878-6366
Pinewood	452-5878
Port Royal	524-5123
Prosperity	364-2121
Ridgeland	726-3232
Ridge Spring	685-7411
Ridgeway	337-2211
Rock Hill	(Info) 329-7200
	(Emer) 329-7211
St. George	563-3311
St. Matthews	874-2131
St. Stephen	567-3115
Salley	258-3449
Saluda	445-2116
Santee	854-2438
Scranton	389-2222
Seneca	885-2718
Simpsonville	963-3661
Society Hill	378-4681
South Congaree	(Info) 755-2760
	(Emer) 359-8352
Union	427-8481
Varnville	943-2630
Wagener	564-5411
Walhalla	638-5831
Walterboro	549-1811
Ware Shoals	456-7444
Wellford	439-4875
W. Columbia	794-0721
W. Pelzer	947-9794
Westminster	647-5412
Whitmire	694-2121
Williamston	847-7425
Williston	266-7011
Winnsboro	635-4511
Woodruff	476-8131
Yemassee	589-6315
York	684-4141

STATEMENT OF WILLIAM J. McCORD, DIRECTOR, SOUTH CAROLINA COMMISSION ON ALCOHOL AND DRUG ABUSE

Mr. HOLLINGS. Mr. McCord of our South Carolina Alcohol and Drug Abuse Commission. We are usually last in everything. I will never forget, I kicked off a program as Governor and it was the Governor's conference on business, industry, agriculture, and education and we were going to go from 50th to 1st, and the next day on my desk over in the Governor's office it said "Congratulations Governor, you finally made it." It was an article to the effect that South Carolina was No. 1 in venereal disease. I am delighted that you are getting us No. 1 in something else, Mr. McCord. We will be delighted to hear from you at this time.

Mr. MCCORD. Mr. Chairman, it's a pleasure, I have sort of had my Christmas for 1990 by sitting as a part of this audience and hearing every distinguished member of the law enforcement legislative panel talk about what we have been saying at the Commission for years and years and years.

Senator HOLLINGS. Thirty years you have been in it.

Mr. MCCORD. Gosh, we like to died from silence there for awhile, but I will tell you I am tremendously pleased with what you have heard today and I wish you could take this message back from South Carolina to the policymakers, particularly in the drug czar's office and otherwise, and let them hear that, because I think we do some things well. We, as a people, work well together. I think you will find evident testimony of that as you have these hearings throughout the State of South Carolina. Not only how we interface between demand reduction and supply reduction, but how we work together as agencies.

We don't spend as much money as other States, but I will defy any State to spend it in a better place and for better kinds of programs than we do in South Carolina. And you, Mr. Chairman, are a part of the architect of that system. I want to give you credit publicly for the extraordinary and courageous work you have done to assist us through the years, particularly in the last 2 years. I might put a P.S., and your staff has been great too.

Senator Rudman, we have followed you also through my counterpart, Geraldine Sylvester, and I have done a lot of work and been in your beautiful State many times and found out basically the characteristics of our people are very, very similar, how we think and how we do, and so it's a pleasure to have you here with us.

Thirty years I have sat in this seat and watched and observed and there are some comments I would like to make, not necessarily what is in the written testimony but particularly from the standpoint of the role you two Senators play in impacting of the Federal budget process, and particularly what comes down the pike as it relates to what we call the war on drugs. I almost wish it hadn't happened, because having been a military man myself, having retired from the military, active, and reserves, I wouldn't find that we are very optimistic about winning this war because we haven't even defined it. We don't know the battlefield. We don't even know who the victims are, because the war on drugs coming out of Washington leaves out the No. 1 drug, and that is alcohol.

We see, Senator, as you know, roughly 1½ percent of this State's population every year in local alcohol drug agencies. You will hear from some of those in their programs. Every year that is 1½ percent of this State's population. About 82 percent of those are first time entries. This is a problem, not necessarily of epidemic but, unfortunately, endemic proportions, it's been there. The word is though, and I will tell you this——

Senator HOLLINGS. What is your arithmetic there, 35,000, 50,000.

Mr. McCORD. Of 3.4 million. We saw 52,284 last year because every one of those people who are seen are part of the management information system. We can tell you who they are, how old they are, how educated they are, what is their drug of choice, and I can tell you that 76 percent at the last time their drug of choice was alcohol, but most people who use drugs when they get addicted aren't very discriminating about that choice and few people do we see on one drug or the other. Particularly when it comes to prevention, you cannot prevent cocaine and marijuana unless you prevent other substances that represent the greatest risk to the public's health and safety, be they legal or illegal. I want to remind you that alcohol is illegal for people under 21 all over this country and it's not getting its share of the policy attention.

Everytime we as public policymakers or prevention professionals or program professionals promote to fight this war on drug abuse and leave out alcohol, we are actively participating in passive promotion. We are participating in passive promotion, and it creates a problem whereby kids in America don't perceive the risks of alcohol, yet alcohol kills more young people over and over—I can't say 20 times, 100 times, more than all the other drugs put together from age 15 to 24, and, yet, only 27 percent of high school seniors in America think that daily use of alcohol represents a risk to their health and safety.

As a perception of risk in a given population or subpopulation goes up, the use comes down. We know that from marijuana. We know that from cocaine, and except for the alarming increase of crack cocaine, particularly with young black males in South Carolina and this Nation, which is a population critically at risk, there is a reduction of drug use, even alcohol in all populations. So, there is some good news. The problem is so great it's hard to celebrate right now.

To go back to the issue of including alcohol, let me bring out some figures. We are dealing with a war on drugs, is that right? In 18 years in South Carolina we lost 885 people in the Vietnam war. Last year we lost 3,200 plus South Carolinians from alcohol-related accidents or injury or illness. That's almost four times as many as we lost in the Vietnam war in the 18 years of conflict compared to 75 from accidents or death related to illegal and legal drugs, prescriptions drugs. So we need to get this thing in order. This is not unrepresentative, Senator, I would say in New Hampshire or anywhere else, and, yet, the language—how many times have you heard alcohol mentioned? I didn't hear any of them but Representative McKinley Washington talk about it, because it's not only a problem now, crack cocaine is epidemic in our black community particularly, but alcohol has been endemic for years and years and years, and we have got to look at that.

The other thing that I see as a critical factor in the prevention of drug abuse is that it is not the school's responsibility. It is the community's responsibility and the school is a part of that community. What we have learned from prevention in tobacco and health is that when the message is being imparted in the educational system, is represented and reinforced by what is being said in the community, then you get success. The best curriculum in the world related to alcohol and other drugs in the public schools and all the "Just Say No" and everything else, if that is not reinforced in the community, in churches, on the airwaves, then we will not reduce its use.

I am aware of your committee's responsibility on advertising, and I want to highlight we can spend our little hundreds of thousands of dollars and millions of dollars to do prevention and then go home and turn on the tube and have it say, "Turn it loose tonight, don't hold back, if you want to make an all night of it without going back down, use this variety, it works every time." All of the messages to educate the children of America. We have got to have a balanced approach and I beg you to do something about the excesses in alcohol advertising that bombard our youth from birth until the grave unfortunately in almost uncontested fashion.

So I want to make the point that I think it's important that we see prevention as a community problem. The DARE program is magnificent. We have over 90 officers now who have been trained. We are going to institutionalize the program. This has been done by the State department of education, SLED, and our agency. The Governor's money, and I think I can say say this, the $4 million we have, that is the increase we have had over the $1.7 million of last year under the Systems Improvement Act. They have tentatively designated a rather substantial amount for the DARE program. I wish McKinley Washington were here because I have asked for $150,000 to match the Federal money and I want him to know while he is going in there to write the budget to write it in.

DARE is a magnificent program, but it is only a piece of the prevention puzzle. It is for the fifth and sixth grade. We have programs now, K through 12 curriculum, incorporating the best curriculum, that is, grade-based curriculum, the "I am special," the others, and then, of course, you are familiar with our Teen Institute, to me the most powerful thing we have done in prevention, and that has to do with turning peer pressure around, creating a new kind of hero.

I want to introduce a special guest we have here with us today, Ms. Alicia Patino from Cali, Colombia, South America who has worked with us through the Partners of the Americas. Senator, we have just put on a South American version of the South Carolina Teen Institute in Cali, South America, and now they have put on one in Uruguay and are going to replicate that throughout the South American continent. Demand reduction has to be done all over. They have a problem just as serious, and Mrs. Patino and many others like her, join the courageous president of Colombia in trying to make a difference with considerable risk to their own safety. I want to recognize what we have learned about in prevention, that we live on a small globe and what we do here can have impact everywhere else.

The other thing having to do with drafting legislation, you made a valiant effort to protect South Carolina, and other States like

New Hampshire and other small States that could be called rural States. We have had a reduction, as you know, by the reallocation of the formula that put a disproportionate weight on urban. Now there is an attack on the block grant mechanism which means we might lose up to 60 percent of the block grant that we spend in this State to go to the community programs to deal with the issues of the special interests of the minority community, the women, the primary health care centers. What that means if we go with Congressman Waxman's language and put that categorical money from the block grant into those programs, that means that the poor States of California, Texas, and New York and their primary health care centers are going to get all the money that we would have had and spent here, and we will be accountable for that.

I might say one other thing, please as we begin to expand funds for our alcohol and drug abuse prevention programming and treatment programming that we hold States accountable for the expenditure of those dollars. There is no better message to get the best bang for the buck than to hold people accountable for treatment. Senator, treatment works, I have no question. I also have no question that prevention works, but prevention is a long-term investment. Fram oil filters, you pay a little bit now or pay big bucks later. That is one of the issues we need to talk about when it comes to legislation is that we hold us accountable. Unfortunately, I think much of the school moneys from the Drug Free Schools Act goes to the districts on a per capita allocation, student per capita allocation, and in many cases there is no adequate means of accountability of those funds because awareness in a community does not mean there is a proportionate share of sophistication to administer the programs.

In South Carolina, by and large, we spent our drug free schools money well, but, yet, nationally I am aware there is not enough accountability over those dollars. I believe in having locals determine and States determine their needs and priorities, but hold us accountable to assure you are getting what your policymakers have chosen to provide the money for. That is good management.

The other issue, as you well know, South Carolina is a so-called rural State. Don't you think that people in Williamsburg and Hampton and Allendale and Jasper don't have a huge cocaine problem? By the way, we have had a 4,000—3,900-and-some-odd percent increase since 1980 in cocaine admissions to our treatment center, that is right about 4,000 people. While the percentage is impressive, the numbers are impressive also, but it's not as great as the 28,000 we admit for alcohol, but I might tell you that Hampton County has an admission rate for cocaine addiction to our system which is three times greater than the State's average, so when you mix big city, urban Senators again tell you about the problems they have got, you have got it in rural communities all over South Carolina and in New Hampshire, and it's just as needed and the value of a life is just as great. So we need to have that recognized that drug abuse is not just a big city phenomenon. It challenges the quality of life in a small county, small rural poor county like Williamsburg or Clarendon or Allendale perhaps even more so than it does a large urban center. I would ask you, and we would be happy to provide you with statistics to back that up.

The other is the church. I want to tell you you have heard it here, but you are going to hear next from Bishop James, church is a really tremendously underutilized resource in prevention, and our black citizens in South Carolina have really done an exceptional job in demonstrating how we ought to go, and I just want to say it's money well spent. I also wanted to tell Representative Washington that we would ask for your continuation in the budget so I wish he had stayed a little longer. I commend you and your committee, and I watch daily what you have been able to do and how you have held the wolves off, and the last thing, if people want to give money to urban centers, put in more money, don't try to stretch the poor bucks we have got, give us a better break between supply reduction and demand reduction. I think in the short term we have got to have active law enforcement, more law enforcement and in the short long term we have to have prevention, intervention, and treatment. I commend you for your foresight in writing the necessary legislation and funding it, which is a big task to support that premise.

PREPARED STATEMENT

Senator HOLLINGS. We thank you very much. We will place your statement in the record in its entirety.

[The statement follows:]

STATEMENT OF WILLIAM J. McCORD

I want to thank Senator Ernest F. Hollings, chairman of the Senate Appropriations Subcommittee on Commerce, Justice, State and the Judiciary, for inviting me here today to address an issue to which I have a very strong personal and professional commitment.

The testimony I will be presenting is on behalf of the South Carolina Commission on Alcohol and Drug Abuse (SCCADA), the state agency responsible for providing programs and services to prevent and reduce the human, social and economic consequences resulting from the use of alcohol and other drugs in South Carolina. As the senior state alcohol and drug program director in the United States, I have been involved in this field since 1958. In 1959, I was hired as the first full-time professional employee of the state's first alcoholism education program, the predecessor to the state agency as we know it today.

During the past three decades, I have seen many changes in the public's perception of the issue of drug abuse in our society. I have seen also many changes in the way our local, state and federal governments have dealt with the issue and its concomitant problems. Thus, I hope my experience will prove beneficial in helping to put our current drug problem into its proper perspective.

I am certain you will hear eloquent testimony from many individuals who are actively involved in fighting the war on drugs through law enforcement and other efforts to reduce the supply of drugs. You will hear many others who will discuss specific strategies currently being used in this state to reduce the demand for these substances. My testimony will address also the area of demand reduction but from a much broader perspective.

In my opinion, we will never be able to effectively control our current drug epidemic until we can reduce the number of users, and ultimately, their demand for drugs. No matter how hard we work to eliminate drugs from our society through large-scale and often-costly law enforcement and other supply reduction techniques, there will always be those who will work even harder to make drugs available as long as the demand continues. But if there's no demand, there's no need for a supply.

The problems of alcohol and other drug abuse affect all segments of our society, and consequently, they can be solved only when all segments make a firm commitment to work together to reduce both the supply of and the demand for drugs. That's why it's essential that we all understand the interrelationships of the educational, law enforcement, judicial, treatment and other systems involved in this effort. We must not forget that we're all fighting the same war. We are not adversaries in the current war on drugs but strong allies who should be working toward the same goal. I hope these hearings will help us reach that goal.

Throughout my career, I have been committed to the development and implementation of a comprehensive, statewide service-delivery system that provides primary prevention, intervention and treatment services to the residents of South Carolina. This system was founded on the philosophy that alcohol and other drug related problems develop at the community level where their greatest impact is felt;

thus, direct services should be provided at that same local level. Today, the SCCADA continues to provide programmatic and administrative oversight to this community–based system. Authorized by the General Assembly in 1973, this system consists of 37 single– and multi–county alcohol and drug abuse agencies that provide direct services in all 46 counties of the state.

I am extremely proud of this system's responsiveness through the years in meeting the state's ever–increasing needs. During fiscal year 1989, this system provided more than 1.8 million contact hours of primary prevention activities to 416,773 individuals in South Carolina. In addition, it provided intervention and/or treatment services to 51,841 individuals, or approximately 1.5 percent of the state's total population.

Two years ago, this system was named the "Outstanding National Program for 1988" by the Alcohol and Drug Problems Association of North America. South Carolina was selected as the 1988 recipient of this award primarily in recognition of its statewide programming network and for the contributions this network has made to efforts at the national level.

Yet, despite its many outstanding accomplishments through the years, the state system is far from reaching all South Carolinians who are currently in need of assistance. According to recent estimates, there are approximately 574,700 South Carolinians ages 12 and older who have serious drinking problems or drinking habits that put them at high risk for developing such problems. In addition, an estimated 180,407 South Carolinians in this age group have serious problems with other drugs or are at high risk for developing them. Thus, each year, only about 19 percent of the state's high–risk individuals receive intervention or treatment services through this system.

During the past decade, there has been much more attention than ever before focused on the nation's drug problems. As a result, the public's perception of the dangers associated with drugs has never been greater. This is indeed good news, because as the public's perception of the risks associated with drugs increases, actual use of these substances decreases.

This is precisely what has happened among some of today's youth. According to recent surveys, illicit drug use has declined among high school seniors, college students and young adults ages 18 to 25. This does not imply, however, that the war is over. Quite the contrary, since drug use is typically higher among other youthful populations who are unlikely to respond to drug use surveys, such as school dropouts, the unemployed, the economically disadvantaged and those in jail.

Minorities, particularly blacks, represent another special population currently at high risk of involvement with illicit drugs, particularly cocaine. While blacks comprised approximately 32 percent of the state's total population in 1989, they accounted for more than 64 percent of all cocaine abusing clients who received services through the state system during the same year. This problem is particularly prevalent in some of the more rural areas of the state. In Hampton County, for example, per capita admissions for cocaine abuse were almost three times the state average.

Nevertheless, efforts to inform the general public as well as specific high–risk groups about the dangers of drug use can indeed have a positive impact on the problem. So why, then, does alcohol remain the overwhelming drug of choice among persons of all ages, particularly young people? And why does alcohol continue to be the number one drug of abuse, accounting for approximately 74 percent of all admissions to the state's treatment system each year?

Quite possibly, because current media and governmental attention to the war on drugs totally ignores alcohol as a public health and safety problem, even though the social and economic costs associated with the use of this drug are far greater than those attributable to the use of cocaine. In 1987 alone, 3,252 South Carolinians died from alcohol related accidents and illnesses, while 75 died from drugs other than alcohol. Each year, this is almost four times as many South Carolinians as died in the entire 18 years of the Vietnam War. Among young people ages 15 to 24, alcohol is ***the*** leading cause of death. Of the 683 deaths in this age group during 1987, 316 (or 46 percent) were due to alcohol, primarily alcohol related car crashes, while six were attributed to other drugs. And it's important to remember that alcohol ***is*** an illegal drug for the majority of this population.

It's no secret that alcohol is involved in nearly one–half of all accidental deaths, suicides and homicides that occur each year in this country and that nearly one–half of all convicted inmates were under the influence of alcohol at the time they committed their particular offense.

Alcohol is a factor also in the majority of all marital violence, child molestation, child abuse and neglect, and family court cases in this state. Fetal Alcohol Syndrome (FAS) is now the second leading cause of congenital mental retardation in South Carolina, and not surprisingly, it's the only cause that's totally preventable. Approximately 1,234 infants are born each year in this state with full or partial FAS. In 1989, the lifetime cost of care, treatment and lost wages for ***each*** of these children was conservatively estimated at $1.3 million.

I am in no way attempting to minimize our society's problems resulting from the use of illicit drugs, such as cocaine and marijuana. Of drugs other than alcohol, cocaine and marijuana are the primary illicit drugs for which South Carolinians seek treatment. However, I am compelled to point out the inequity of the government's attention to the overall drug problem facing our state and nation today. In my opinion, the current war on drugs focuses the public's attention solely on illicit drugs, and as a result, it continues to perpetuate the common myth that alcohol is innocuous despite overwhelming evidence to the contrary.

The truth is: a drug is a drug. We all acknowledge that words like "mind–altering," "destructive" and "addictive" are typically used to describe the properties of illicit drugs like cocaine, heroin and LSD. Why are we so reluctant to use these same words to define alcohol, our society's legal drug? Although it may take a person longer to become addicted to alcohol than to crack, the addiction is no less painful nor are the concomitant problems any less devastating in the home, on our highways, in the workplace, on our streets or in our schools.

Nevertheless, we as program managers are forced at times to support this one–sided view of the war on drugs, because funds often are earmarked solely for programs to address the illicit drug problem. Obviously, some of our public policymakers fail to understand the nature of addiction. Addiction to alcohol or other drugs are ***not*** mutually exclusive, nor should they be treated as such. Thus, I encourage policymakers at the federal level to amend drug legislation affecting the areas of health, criminal justice and education so as to ensure the inclusion of alcohol in the current war on drugs. Such an action would not only allow our state and nation to address more adequately today's "drug epidemic," but it would also dispel some of the common myths and misconceptions surrounding our most popular drug, alcohol.

In addition to the more obvious impact on the public's health and safety, drug abuse takes a tremendous financial toll on our state and nation as well. The economic cost resulting from the abuse of both alcohol and other drugs in South Carolina totals approximately $3.2 billion each year. This is almost as much as the entire South Carolina state government annual budget. Or, to bring it a little closer to home, alcohol and other drug abuse costs this state almost as much each year as the estimated total insured losses which occurred in South Carolina as the result of Hurricane Hugo.

Each adult in this state pays $1,196 each year to cover the cost of this abuse. These costs are reflected in such factors as artificially increased prices for all goods and services (because abusers are absent more often and are less productive when they are at work); higher taxes (for additional police and jails to deal with drunk driving and other drug related arrests); property losses (due to thefts for drug money or car crashes); and higher health care costs (to cover the cost of abusers who use the health care system more extensively).

Unless we can reduce the demand for alcohol and other drugs among the general public as well as specific high-risk groups, these numbers and their concomitant problems will only continue to escalate. In an effort to address South Carolina's problems in this area, the state system implements a comprehensive demand reduction strategy which focuses attention to three areas: primary prevention, intervention and treatment.

Primary prevention efforts are designed to educate citizens both young and old in an attempt to promote overall health and wellness, to delay the age of first use of alcohol and other drugs and to avoid the development of problems related to the use of these substances. Thus, prevention activities are designed to reach individuals who are currently abstinent as well as those who are currently using.

Intervention programs provide for early detection of individuals identified through the school, the family, the workplace, the courts or other health or social systems. These efforts are designed to identify individuals and families who may be experiencing alcohol and other drug related problems, to assess the nature and extent of those problems and to refer them to the appropriate services.

Treatment services are equally important in reducing the demand for alcohol and other drugs. These efforts are designed to arrest the disabling effects of the misuse of or addiction to these substances and to prevent the recurrence of related problems or disabilities. In South Carolina, a mere 4.2 percent of all adults consume half of all the alcohol consumed in this state in any given year. Similar dynamics apply to the use of prescription as well as illicit drugs. In most cases, these are the same individuals who have lost control of their use of alcohol and other drugs and are most in need of treatment. Obviously, effective treatment programs provided to this small but significant consumer population can greatly reduce the demand for drugs.

The multitude of problems currently associated with the use of these substances at times seem overwhelming. The growing number of damaged babies born to cocaine and/or alcohol using mothers, the spread of AIDS through intravenous drug use, the increased violence of drug gangs, the involvement of youth in drug trafficking, the constant threats to the public's health and safety caused by impaired drivers all illustrate the complexity of the issue at hand.

Nevertheless, I am convinced that we can win the current war on drugs, but not without a great deal of time and energy. And, more importantly, not without a firm commitment from us all to work together toward a common goal: a safer, healthier environment where each of us recognizes the value and significance of our own life as well as the lives of others. In essence, such a commitment would hold all individuals accountable for their actions.

Historically, we have perceived the drug trafficker as the criminal and the casual drug user as harmless. Although we have recognized that the casual user may be hurting himself, we have tended to minimize his threat to others.

But, unfortunately, even casual drug use is not a victimless crime but one that represents a vicious, self–perpetuating cycle. The demand for any drug in any quantity, large or small, helps to finance the drug traffickers who are willing to commit heinous crimes in order to keep their lines of supply open. In turn, this demand perpetuates the current supply of drugs and their concomitant problems. That's why it will take a balanced, comprehensive strategy to reduce both the supply of and the demand for these substances if we are ever to come close to winning the war.

STATEMENT OF BISHOP F.C. JAMES, PROJECT ADAM

Senator HOLLINGS. Bishop James is the bishop of our AME Church. He was out in Arkansas and Oklahoma and served formerly as the bishop in Botswana. You must have been watching the developments there yesterday in South Africa with tremendous interest. Mandela has been a real leader for years, 35 to 40 years that I have known the gentleman and I am always inspired by him. We welcome you to the subcommittee and tell us of your program, Bishop James.

Bishop JAMES. Thank you, Senator Hollings, the Honorable Senator Rudman, the honorable members of the Senate subcommittee, and of this very, very great panel, ladies and gentlemen. We thank you for the privilege of bringing information to you today concerning the efforts of the South Carolina Coalition of Black Church Leaders and its Project ADAM to reduce the threat of drug abuse and the threat that it poses among black community youth of our State, particularly those in the black churches.

The coalition is a nonprofit organization comprised of ministers and lay leaders representing more than 2,500 black churches of every major denomination throughout South Carolina numerically, and of other major small denominations as well. These leaders have a constituency of more than 350,000 black South Carolinians.

For more than 200 years now the black church has been traditionally in the forefront seeking solutions to problems facing the black community as a whole. Capitalizing on this rich tradition, the coalition is working through the churches to develop positive programs to help confront and overcome some other social problems, but one of the foremost problems facing our citizens and our churches and our young people, black and white, we find to be drug abuse. Drug abuse ranked fifth among the most serious human services problems in our State in 1987 according to our great leader here, the South Carolina Commissioner on Alcohol and Drug Abuse. Just as disturbing was the fact that alcohol abuse was ranked as the No. 1 human service problem during that same period above the rest.

In 1987 substance abuse-related arrests accounted for 42 percent of all arrests in South Carolina. Of that 42 percent, 35 percent were alcohol-related arrests and 7 percent were drug-related arrests. What is extremely disturbing to the Coalition of Black Church Leaders is that in 1988 43 percent of drug arrests in South Carolina occurred among minorities. That figure is a slight increase from the 40 percent of arrests among minorities in 1987, and 39 percent in 1986.

The coalition realizes that all illegal drugs inflict pain and suffering on all of the citizens of our State. Because of its psychological, physiological, and economic damage, there is probably no other illegal drug that carries as heavy an impact as cocaine. In 1989, minorities comprised 64 percent of all cocaine clients in the SCADA system. When you compare that to 61 percent in 1988 and 50 percent in 1987, I believe that the severity of the problem cannot be ignored.

The vicious drug dealers who operate in our communities are not satisfied with destroying the lives of black adults. They have set their sights upon gaining profits by ruining the future of our greatest asset, our children. A pilot study conducted by SCADA earlier this year indicated that a significant number of high school students are falling prey to the appeal and addictiveness of marijuana and cocaine. Thirty-six percent of all 12th graders have used marijuana they reveal, compared to 29 percent of 11th graders, and 26 percent of 10th grade students.

The statistics for the use of cocaine among high school students are not as high as they are for marijuana, but they are just as discouraging. Eight percent of all 12th graders have used cocaine, compared to 6 percent of 11th graders, and 5 percent of 10th grade students in this State. Recognizing drug abuse is one of the major problems affecting the black communities, the coalition has responded by establishing a movement known as Project ADAM, the antidrug abuse movement of which it is an acronym.

Project ADAM offers positive programs to help educate our children on the dangers and consequences of drug abuse before they have to face that dangerous threat. We seek to do it in the church, in the environment of the church, and under the leadership of the church. Project ADAM offers a variety of recreational and educational activities to help build positive self-images and influence them to lead drug-free lives before the temptation.

Working in connection and in conjunction with SCADA again—and we thank God for the leadership that we have in our South Carolina Alcohol and Drug Abuse Commission—numerous churches in the coalition have set up the clubs, "Just Say No" clubs. And these go as far as as they can go, but we have gone beyond that. These clubs engage in activities that help our youth appreciate themselves, help our youth appreciate their families. Club members also learn about the harmful effects of drugs on their young minds and bodies. We gather material, show slides, conduct seminars, combine it with areas of interest to them. We sweeten it with things that we know they want to do, and in so doing get their attention.

In the areas of intervention and treatment, Project ADAM, working in connection with local alcohol and drug abuse offices, identify troubled youth and provide them with appropriate treatment services. This caring approach gives them a better understanding of their personal responsibilities, their family relationships, decision-making skills, as well as a healthy self-concept and accurate information on drug abuse.

The members of the coalition consider drug dealers as nothing more than ruthless villains. They find and exploit new markets as well as serve the markets they have already created leaving behind them a path of addiction, deception, crime, health problems, and broken families. So our coalition has decided we will not stand still for this. We have declared an educational war on drugs among black church youth.

We are now planning our second Project ADAM walk-a-thon, and I would like to share with you some of the activities and some of the success that we had in the first walk-a-thon conducted in certain significant communities of South Carolina. This is the way our statement appeared in the Project ADAM newsletter, which I would like so much to leave with your honorable committee.

Senator HOLLINGS. It will be included in the record.

[The information follows:]

Project
ADAM
Anti
Drug
Abuse
Movement
update

Summer 89
Volume I Number 2

More Than 2,500 Walkers Participate In 1st Annual Walk-A-Thon

By all accounts, the 1989 Project ADAM Walk-A-Thon was a tremendous success.

On Saturday, April 22, more than 2,500 youths and adults from across South Carolina joined hands in the battle against drug abuse. They took to the streets in Aiken, Charleston, Columbia, Georgetown and Greenville to protest the use of illegal drugs in their communities.

"It was very uplifting to see young and old, mother and daughter, father and son, teacher and student, minister and church member turn out for the walk," said Bishop F.C. James, chairman of the S.C. Coalition of Black Church Leaders. "They decided to take a stand against drugs. We are sending a loud and clear message that we will not sit still and allow drugs to steal our youth — our promise for the future."

Additionally, the statewide project raised more than $11,000, which will be used to further programs sponsored by Project ADAM.

The five-mile walk was the first of its kind to be sponsored by the Coalition. It not only received support from Black churches throughout the state, but from businesses and organizations which donated money and in-kind contributions.

"We are very appreciative of the outstanding support that Project ADAM received from those groups which felt compelled to join in the battle. Their interest and support really demonstrated a commitment to help bring about a change on the demand side of this drug problem," said Bishop James.

Highlights of the Walk-A-Thon:

In Aiken, members of Cumberland AME Church and Friendship Baptist Church coordinated the march. After completing the walk, participants returned to Gyles Park, where Ernest Mitten and

Larry Golden, two recovering drug addicts, shared their experiences with the crowd.

Over in Columbia, more than 1,000 walkers marched from Allen University on Harden Street to the State House grounds on Gervais Street. Here the crowd was inspired through songs and an electrifying message from Bishop James.

Also, prizes were presented to the church and school having the most participants. Virginia Pack Elementary School won in the school category, while Bibleway Church of Atlas Road captured the honors among the churches.

Wearing their official Walk-A-Thon t-shirts, nearly 400 participants from 13 churches and communities, along with ministers, city officials and community leaders were represented in Greenville's walk.

Region One Coordinator Reginald Pearson noted that a special thanks goes to the Palmetto State Law Enforcement Officers Association for donating $1,000 to buy t-shirts for all participants.

Also, Project ADAM certificates were awarded to walkers who reported $25 or more in contributions. Reedy River Baptist Church was recognized as the Walk-A-Thon Church of the Year, having the largest number of participants and raising the most money.

After the award ceremony, several of the Walk-A-Thon participants accompanied Greenville city officials to the Greenville-Spartanburg Airport, where they greeted and presented Vice President Dan Quayle with a Walk-A-Thon t-shirt.

More than 800 community leaders, church officials, parents and youths in Georgetown marched, sang and spoke in support of Project ADAM.

In nearby Charleston, nearly 400 walkers under the leadership of Region Three Coordinator Rev. Levern Stevenson participated in the special event.

Chairman's Message...

PROJECT ADAM WALK-A-THON CALLED A SUCCESS

The Project ADAM Walk-A-Thon told us something!

Twelve Hundred (1,200) in Columbia!

Four Hundred (400) in Charleston!

Eight Hundred (800) in Georgetown!

One Hundred (100) in Aiken!

Four Hundred (400) in Greenville, and hundreds unorganized statewide simultaneously on Saturday, April 22, from the mountians of the Piedmont to the shrimp sands of the Lowcountry. South Carolina's Black churches, youths, and adults of every denomination walked miles and miles in response to the Project ADAM call to sound the alarm over the menace of drug abuse.

The message was clear! The Black Church was responding in South Carolina. This, of course, was typical of the Black Church in South Carolina. In matters of grave significance to the Black community, the Black Church has always responded with resolution.

Salutations are in order to director Darrell Jackson, coordinators Gloria Simmons, Levern Stevenson and Reginald Pearson, Walk-A-Thon organizers, pastors, lay leaders, and especially youth in the Columbia, Charleston, Georgetown, Aiken, and Greenville areas.

Your work and your witness have raised the level of Project ADAM awareness, program sensitivity, and particularly involvement.

We must now move forward. We call upon every Black Church in South Carolina to deal with the menace of drugs in some capacity on a weekly basis. A discussion, a seminar, a workshop, a brochure, a notice, an announcement, a referral, a prayer, a reminder. From pulpits, Sunday School classes, prayer services, Sunday bulletins, bulletin boards, adult and youth groups, video and audio productions, we must educate our youth. By whatever -- however – whoever. **Every seven days in every Black church in South Carolina, join the 200 targeted Black churches in intensifying the program to make young Black citizens of South Carolina aware of the menace of drug abuse.**

We further suggest a concerted effort in all Black church communities to help locate, create, and facilitate **summer job opportunities for young Black students to earn for themselves some legal money for the holidays.**

Youth job opportunities, recreational involvement, remedial study, youth Church programs represent detterent activities from the victimizing grip of drug traffic, use and abuse among the youth in the Black community.

In April, you joined Project ADAM, in proving that we could WALK FAST against BLACK TROUBLE!!

In June, join us again in proving that we can **STAND TALL for BLACK PROGRESS!!**

Bishop F.C. James

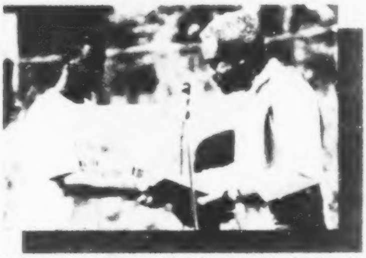
Looking Back...

The "Big DM" contributions recognized

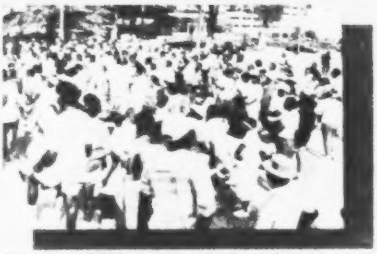
A round of applause goes to WWDM-FM radio and its president John Marshall for actively supporting the 1989 Walk- A- Thon. The radio station, popularly Known as the Big DM, collected nearly $900.00 in its Thursday Night Fundraiser, and Donated $500.00 to Virginia Pack Elementary School. With more participants than any other school in Columbia's Walk-A-Thon.

Additionally, in weeks leading up to the walk, WWDM donated free air time for promoting the special event.

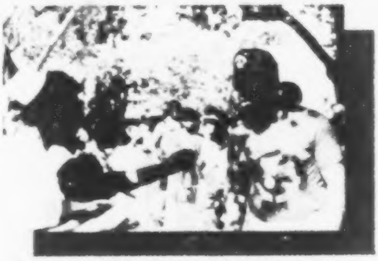
A Columbia Walker expresses her feelings about drugs with a bumper sticker.



In Greenville, Region One Coordinator Reginald Pearson, right, presents first place walker trophy to Pernell Sullivan of Piedmont Manor Baptist Church.



More than 2,500 concerned citizens from across South Carolina supported the first Annual Walk-A-Thon.



A refreshing thirst-quencher for faithful participants.

Walkers in Columbia and Greenville took to the streets to show their concern about the growing use of illegal drugs.

Survey... page 2

"We think this important decline in marijuana use has been occurring, and continues to occur, largely because of changes in the risks which young people associates with the use of this drug," stated Johnston. "In 1978, the peak year for daily use, only 35 percent of seniors thought there was a great risk associated with regular marijuana use. Today that number stands at 77 percent and is still rising."

"These important changes in young people's beliefs and attitudes about these drugs, and the declines in use which have accompanied them, tell us a great deal which is relevant to our national strategy in the overall war on drugs," Johnston commented. "The declines in use have occurred in spite of continuing increase in the availability of cocaine and crack, as reported by seniors, and a fairly constant level of availability for marijuana. In other words, these important successes have been achieved not through supply reduction — they are due almost entirely to reduction in demand. These results say to me that demand reduction can work, has worked, and has the potential to accomplish a great deal more."

EBONY

PROJECT ADAM TO BE FEATURED IN NATIONAL MAGAZINE

Project ADAM's program will be spotlighted in a special feature article in the August issue of Ebony, a nationally recognized Black magazine.

According to Darrell Jackson of Sunrise Enterprise and director of Project ADAM, the article centers around special programs and activities which are being sponsored by Black Churches across the United States to help address the drug issue.

"We are delighted to have the opportunity to share our program in such a well known and respected magazine as Ebony. Everyone involved with Project ADAM can be truly proud of its accomplishments and this recognition," Jackson said. "The magazine will be on news stands by late July. So don't forget to pick up a copy of Ebony and read about Project ADAM."

Project ADAM
Anti Drug Abuse Movement
S.C. COALITION OF BLACK CHURCH LEADERS, INC.

Project ADAM Update

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Bishop F.C. James

Vice Chairman
Bishop A. C. Jackson

Vice Chairman
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UPCOMING EVENTS

JUNE

June 24 [illegible]

June 24 [illegible]

JULY

July 29 [illegible]

BULK RATE
U.S. Postage
P-A-I-D
#535
Columbia, S.C.

Bishop **James**. Thank, you sir. The Project ADAM walk-a-thon told us something. There were 1,200 marchers in Columbia, 400 marchers in Charleston, 800 marchers in Georgetown, 100 marchers in Aiken, 400 marchers in Greenville, and hundreds unorganized statewide simultaneously on Saturday, April 22 from the mountains of the Piedmont to the Shrimp Sands of the low country. South Carolina's black churches, youth, and adults of every denomination walked miles and miles in response to the Project ADAM call to sound the alarm over the menace of drug abuse. The message was clear. The black church was responding in South Carolina.

This, of course, was typical of the black church in South Carolina in matters of grave significance to the black community, the black church has always responded with resolution. Salutations are in order to director Darrell Jackson, coordinators Gloria Simmons, Levern Stevenson, and Reginald Pearson, walk-a-thon organizers, pastors, lay leaders, and especially youth in the Columbia, Charleston, Georgetown, Aiken, and Greenville areas. Your work and your witness have raised—and this is to all who support Project ADAM—have raised the level of Project ADAM awareness, program sensitivity, and particularly involvement.

We must now move forward. We call upon every black church in South Carolina to deal with the menace of drugs in some capacity on a weekly basis, a discussion, a seminar, a workshop, a brochure, a notice, an announcement, a referral, a prayer, a reminder, from pulpits, Sunday school classes, prayer services, Sunday bulletins, bulletin boards, adult and youth groups, video and audio productions. We must educate our youth by whatever, however, whoever, every 7 days in every black church in South Carolina. Join the 200 targeted black churches in intensifying the program to make young black citizens of South Carolina aware of the menace of drug abuse.

We further suggest a concerted effort in all black church communities to help locate, create, and facilitate summer job opportunities for young black students to earn for themselves some legal money for the holidays. Youth job opportunities, recreational involvement, remedial study, youth church programs represent deterrent activities from the victimizing grip of drug traffic, use and abuse among the youth of the black community.

In April you joined Project ADAM in proving that we could walk fast against black trouble. In June join us again in proving that we can stand tall for black progress. May I say in conclusion, that while we targeted our efforts to that community that is closest to us and that has traditionally responded to us, the black community, we extend an open hand and open heart to the rest of the South Carolina community to join the spirit, the principle, in doing what a church can do and the people of a church can do to meet the menace of drugs among our young people.

On behalf of the coalition, I would like to thank the members of the subcommittee for the interest and support it has shown. I would like to make you aware of the fact that Mr. Darrell Jackson is here, our director of Project ADAM, and a real strong force in the movement toward which we are addressing our remarks. We pledge to you our full support and our continued efforts to remove the dangerous threat of drugs from as much of our society as we possibly can. Thank you.

PREPARED STATEMENT

Senator Hollings. Thank you. We will insert your statement in its entirety in the record at this point.

[The statement follows:]

STATEMENT OF BISHOP F.C. JAMES

Honorable Senator E.F. Hollings and Honorable Members of this Senate Subcommittee, Ladies and Gentlemen: Thank you for the privilege of bringing information to you today concerning the efforts of the South Carolina Coalition of Black Church Leaders, Inc. to reduce the threat drug abuse poses among the black communities of our state.

The Coalition is a non-profit organization comprised of ministers and lay leaders, representing more than 2,500 black churches of every major denomination throughout South Carolina. These leaders have a constituency of more than 350,000 black South Carolinians.

For more than 200 years, the black church has been traditionally in the forefront, seeking solutions to problems facing the black community. Capitalizing on this rich tradition, the Coalition is working through the church to develop positive programs to help confront and overcome social problems.

One of the foremost problems facing the citizens of South Carolina, black and white, is drug abuse. Drug abuse ranked fifth among the most serious human services problems in our state in 1987, according to the South Carolina Commission on Alcohol and Drug Abuse, which I shall refer to as SCADA. Just as disturbing was the fact that alcohol abuse was ranked as the number one human service problem during the same period.

In 1987, substance abuse related arrests accounted for forty-two percent of all arrests in South Carolina. Of that forty-two percent, thirty-five percent were alcohol related arrest and seven percent drug related arrests.

What is extremely disturbing to the Coalition, is that in 1988, forty-three percent of drug arrests in South Carolina occurred among minorities. That figure is a slight increase from the forty percent of arrests among minorities in 1987 and thirty-nine percent in 1986.

The Coalition realizes that all illegal drugs inflict pain and suffering on the citizens of our state. Because of its psychological, physiological and economic damage, there is probably no other illegal drug that carries as heavy an impact as cocaine.

In 1989, minorities comprised sixty-four percent of all cocaine clients in the SCADA system. When you compare that to sixty-one percent in 1988 and fifty percent in 1987, I believe that severity of the problem cannot be ignored.

The vicious drug dealers who operate in our communities are not satisfied with destroying the lives of black adults. They have set their sights upon gaining profits by ruining the futures of our greatest assets—our children.

A pilot study conducted by SCADA earlier this year, indicated that a significant number of high school students are falling prey to the appeal and addictiveness of marijuana and cocaine.

Thirty-six percent of all twelfth graders have used marijuana, compared to twenty-nine percent of eleventh graders and twenty-six percent of tenth grade students. The statistics for the use of cocaine among high school students are not as high as they are for marijuana, but they are just as discouraging. Eight percent of all twelfth graders have used cocaine, compared to six percent of eleventh graders and five percent of tenth grade students.

Recognizing drug abuse as one of the major problems affecting the black community, the Coalition has responded by establishing Project ADAM, the Anti-Drug Abuse Movement.

Project ADAM offers positive programs to help educate our children on the dangers and consequences of drug abuse before they have to face that dangerous threat.

Project ADAM offers a variety of recreational and educational activities to help build positive self-images and influence them to lead drug-free lives. Working in conjunction with SCADA, numerous churches in the Coalition have set up "Just Say No" clubs. These clubs engage in activities that help our youth appreciate themselves and their families. Club members also learn about the harmful effects of drugs on their young minds and bodies.

In the areas of intervention and treatment, Project ADAM, working in conjunction with local alcohol and drug abuse offices, identify troubled youths and provide them with appropriate treatment services. This caring approach gives them a better understanding of their personal responsibilities, family relationships, decision making skills, as well as a healthy self concept and accurate information on drugs abuse.

The members of the Coalition consider drug dealers as nothing more than ruthless villains. They find and exploit new markets as well as serve the markets they have already created. They leave behind them a path of addiction, deception, crime, health problems and broken families.

The South Carolina Coalition of Black Church Leaders will not stand still for this. We have declared "War on Drugs."

On behalf of the Coalition, I would like to thank the members of this subcommittee for the interest and support it has shown. We pledge to you, our full support in your continued efforts to remove the dangerous threat of drugs from our society.

STATEMENT OF DAVID JAMESON, LEXINGTON-RICHLAND ALCOHOL AND DRUG ABUSE COMMISSION

Senator **HOLLINGS**. Very good. The record will show that Mr. Darrell Jackson is present with us and we do appreciate it.

One of the best, by far, local drug and alcohol abuse commissions is the Lexington-Richland headed up by David Jameson, and we want to hear from you this afternoon. We welcome you and will be glad to hear from you now, sir.

Mr. **JAMESON**. Senator Hollings, I appreciate the opportunity to be here with you and Senator Rudman and to share this panel with such distinguished gentlemen. It certainly is a pleasure to be here and share some thoughts that I have. It was interesting sitting here earlier and listening to all the people talking about the issues of education and getting to young people, and that certainly is a subject that I echo. Our agency is one of 37 alcohol and drug programs covering 46 counties, and, we, of course, are lucky enough to be able to have alcohol and drug education prevention and many of the treatment services under one organization, which is certainly a credit to Dr. McCord and the legislative people of our State in being able to bring these things together.

I was interested to hear the demand for these additional education programs and prevention programs as Bishop James has outlined, and Mr. Washington. They are very important. We certainly support that because it's very difficult for us to get a phone call from parents, from school people, from civic clubs wanting to have the programs, to have the experts to be able to come in and tell them what they can do about this problem. It's very disheartening not being able to respond because of the lack of resources and the lack of staff to be able to do it.

I also want to point out that in this whole process we want to look at the people who currently have the problem. As Dr. McCord and Bishop James said earlier, the cocaine problem is certainly growing here in this area. Because of the treatment resources that we have in our 25-bed detoxification program, we have a waiting list that normally runs about 25 people to get in. In some of our other programs it's as high as three people waiting to get into every treatment slot. When we have young people and we have family members and we have people that want to get help to get off of drugs but can't get into the programs, and they have no other choice but to continue to use and abuse the drugs and chemicals that are out there, it is very, very discouraging to us. When you look at the relative cost of some of the programs, relatively inexpensive to provide, that by providing a good quality treatment service, as well as coupling it with the education and prevention services, we think that we can make a dramatic impact on the demand, because this problem is very similar to cancer, to heart disease, and many others. That is, it starts early and once you can identify the problem early and treat it, the recovery rates are very, very high. The longer you wait, the longer you delay it, the longer you put it off, the harder it is to treat it and the harder it is to have a successful recovery, and that is when we start grasping at a lot of straws. I think that if we can look at this as a public health problem and as a problem that can be dealt with we can have an impact. Unfortunately, something that we end up having to face every day when we turn away people, when we discuss it with a desperate parent, that there is nothing available to them, certainly not now but we can call them back next week when an opening has occurred, then they can't find the child. The child has gone or he is in some kind of trouble or is in my friend Sheriff Sloan or the chief of police here in Columbia's jail, it is very disheartening at that point.

We have been very lucky in South Carolina with Commissioner Evatt with the department of corrections putting in treatment programs within the department of corrections in our department of youth services because if folks aren't treated, if they are not dealt with, we can incarcerate them forever, but as soon as they come out the problem is still going to be there. It is not always a moral problem. It's not someone bad trying to get good. It's someone who is sick trying to get well, and I appreciate that your leadership and the leadership of others in trying to make some of these points. I think if I could leave you with one thought, it's that if we are looking at ways of trying to keep the health costs of our country down, we realize that untreated and unaddressed, some of these alcohol and drug problems are making tremendous drains on our economy, both in health care, in time lost, accidents to our business and industry people and all other segments of the society.

We think it's a good investment to the future of being able to put some of the programs in place because the people who are recovering, and we have over 150 AA meetings alone in the city of Columbia every week, so there are literally thousands of people who are recovering, who are productive citizens, who are no longer a drain on our society but are productive citizens. We believe it can work and we believe in coupling it with a strong law enforcement effort. I commend our people both locally and statewide for the efforts that they are doing. We can have an impact on this problem, and I appreciate the opportunity to be with you and share these thoughts.

PREPARED STATEMENT

Senator HOLLINGS. Thank you. We will place your statement in the record and then I have some questions.

[The statement follows:]

STATEMENT OF DAVID JAMESON

The Lexington/Richland Alcohol and Drug Abuse Council is a private non-profit corporation with offices and programs in both counties. Pursuant to Act No. 1063 of 1972 and Act 301 of 1973, Richland County Council and Lexington County Council are designated as the single authorities for planning and coordinating all alcohol and drug abuse programs within their respective counties. In Richland County, this designation was made by action of County Council through the periodic adoption of County substance abuse plans. Lexington County Council received its authority directly from State Legislature in the Form of Act No. 455 of 1973.

The Council provides comprehensive services which are intended to address the complex issues involved with alcohol and drug abuse problems. For this reason, the Council provides various modes of treatment, offers education and prevention services in the schools and community, and operates an Alcohol Safety Action Program as well as an employee assistance program through C&RE (Counseling and Referral Elective Program).

The Council recognizes that substance abuse is a multifaceted problem and has set forth a plan for FY 90 that provides for the identification of needs and resources as its primary goal. With the support of County Government and the State Legislature, we can do much toward meeting this goal.

DRUGS: A REGIONAL PERSPECTIVE ON PREVENTION AND TREATMENT

Ask anybody on the street, anyone who teaches school, supervises employees, works in law enforcement or provides direct services and they will tell you--drug abuse is a critical problem in our society. Ask any of these people what the solution is and you will hear everything from more education and prevention efforts to tougher sentences to more treatment beds to more law enforcement officers and equipment. Who is right? What is the answer?

At Lexington/Richland Alcohol and Drug Abuse Council, we believe there is no one right answer; all of the above solutions are probably the right response. In the President's report on the National Drug Control Strategy, William Bennett of the Office of National Drug Control Policy states that today, drug abuse is understood "...to be a personal, social, medical and economic catastrophe". There simply is no single solution that addresses all of these issues. This paper will attempt to clarify the major issues on a local, state and federal level, as well as offer approaches for problem-solving. The drug problem is immense. Fortunately, the solutions are numerous and an inclusive perspective offers hope.

The Central Issue

That we have a critical drug problem is more than clear. Helping our communities understand that substance abuse is not a single problem with a single solution is the central issue. Those involved within the school system, either as parents, teachers, students or administrators will call for more prevention and education. On the opposite end of the spectrum, law enforcement will rally for more officers, more sophisticated equipment and tougher consequences. Who is to say which is the best or most effective solution? Both can have a positive effect on the drug problem but each is not the sole solution, even of itself. For example, within the field of education and prevention, the "Just Say No" program has had a positive effect on the children it was intended for: those in fairly stable family environments. It has had no effect on high-risk children, those in single parent, poor families or in homes where substance abuse is already a problem.

The complexity of the drug problem can be explored further through a basic theory in economics: supply and demand. It is clear to most of us that as in any market situation, the drug market is a balance of the "supply" of drug dealers and the "demand" of drug users. We think of the drug problem as a progressive and fast growing industry. Solutions to, or reductions in, the drug problem can also be understood in the same terms of supply and demand.

Supply reduction is best understood as punitive; to reduce the supply of drugs we want to look at crop eradication, stopping drug imports at the borders, stiffer sentences for dealers and users, toughening zoning laws to control crack houses and the zero tolerance concept. Demand reduction is understood as therapeutic; to reduce the demand for drugs we promote prevention and education, set up systems for early intervention and provide treatment when needed. Newer programs that require restitution, use therapeutic chain gangs or other community based efforts also reduce demand.

Thinking about reducing the drug problem in terms of supply and demand typifies how we usually approach the drug problem--as an either/or situation. We are either hard hearted and punitive or soft hearted and sentimental. What we fail to see is how both efforts are interrelated. In our efforts to reduce incoming supplies, we have an effect on demand by making certain drugs more difficult to obtain. Similarly, while reducing demand through education and treatment we have an effect on supply by forcing suppliers to cut back production and distribution to maintain their profits. To be successful in combating the drug problem, we cannot divide ourselves into camps and focus on one side of the problem or the other. We have to begin to organize and integrate our approaches if we ever hope to win the war on drugs.

Related Issues

There are numerous important issues related to understanding the complexity of the drug problem. Looking at it as Secretary Bennett does, as a "...personal, social, medical and economic catastrophe..." may help us organize the issues.

As a personal issue, we need to educate the public that substance abuse does not affect just the addict; it affects the addict's family, friends, neighbors, employer and co-workers. Treating the addict is not enough--we need resources to treat a whole community of people around the addict.

Another issue in treating the individual is developing a means of identifying users outside of the criminal justice system. Many people find their way into treatment through arrest and prosecution. Many others are out there using and remaining undetected because so much of our energy goes into "catching" and processing the "criminal". These undetected users make poor parents, bad neighbors, below average students and unproductive employees, affecting all of us in some way.

Social issues include identifying and addressing how society views substance abuse. The most ignored and perhaps most dangerous problem we face is the casual user. The glamorization of drug use does not occur through the winsome ways of hard core addicts and the Colombian drug cartel. Glamorization of drug use occurs when the casual user enthusiastically recommends their drug of choice and never seems to pay any consequences. Further glamorization occurs when the broadcast media advertises beer and wine, creating and enforcing a culture of casual substance users.

Medical issues abound and add to the complexity of the problem. Much attention needs to be given to how substance abuse affects the health care system and the insurance industry. Funding for treatment of indigent clients is a critical issue as well. The AIDS epidemic has had more impact on the field of substance abuse than any other issue. Its effects are far reaching and largely unknown. Related to the AIDS crisis is the issue of providing free needles to addicts.

Finally, there are the economic issues of drug abuse. American businesses lose billions of dollars every year through drug-related, on-the-job accidents, absenteeism and lost productivity. Drug abuse drastically affects American competition in the market place. It also has far reaching consequences in the cost of programs providing unemployment insurance and workers compensation.

Why the Problem is an Important One

Our country is self-destructing in the wake of rampant drug abuse. The destruction begins in the uterus as mothers inject, inhale and swallow chemicals that cause premature births, low birth weight babies, mental and physical impairments and babies born addicted. The destruction continues and is reflected in the growing violence in our communities, ever increasing crime rates and needless suffering and death of the addicts and innocent bystanders as well. Our social service agencies, health care system, criminal justice system and employee benefit agencies are groaning under the weight of rising caseloads and increasing costs. Drug abuse is not just an important problem; it is an epidemic of crisis proportions.

National Perspectives

National perspectives on the drug problem are inclusive and address the criminal justice system, treatment, education, international and interdiction efforts. Some of the priorities are to: (1) Increase Federal funding to States and localities for street-level enforcement, alternative sentencing programs for nonviolent offenders including house arrest and boot camp, as well as Federal law enforcement activities; (2) Vigorous prosecution of, and increased fines for all misdemeanor State drug offenses; (3) Increase Federal funds for treatment, outreach programs and early treatment for expectant mothers who use drugs; (4) Make Federal funds contingent on implementation of drug prevention programs and policies in schools, colleges and universities; (5) Federal support for community-wide drug prevention efforts and anti-drug media outreach; (6) Disruption and dismantlement of drug-trafficking organizations; (7) Reducing cocaine, heroin and marijuana supplies; (8) Develop a comprehensive information-based approach to Federal air, maritime, land, and Port-of-Entry interdiction; (9)

Concentration on high-value individuals and shipments; and (10) Enhanced border systems, operations and activities.

The Problem in the Midlands

Much of the substance abuse problem in the Midlands is a result of severe impoverished community conditions, typically experienced by minorities and single mothers. In comparison with other counties across South Carolina, the midlands area experiences: (1) one of the highest infant mortality rates 15/1000; (2) highest concentration of the homeless (approximately 1500) which typically experience 30-40% substance abuse; (3) highest concentration of community based mentally ill (38% of which have substance abuse problems); (4) highest rate of commitments for hospitalization of the mentally ill; (5) highest numbers of disabled persons served by the S. C. Department of Vocational Rehabilitation of which approximately 20% are substance abuse related; (6) second highest county for rates of food stamp utilization, a major indicator of poverty; and (7) highest number of deaths per year for cirrhosis of the liver--40 average deaths per year in Richland County alone--twice the level of any other county in South Carolina. Much of the Richland County area was designated by the U. S. Development Agency as economically distressed, ranked as the 16th poorest area in the nation. Approximately 17% of the total area's minority population live below the poverty level. The per capita income is $6,291 for this area. Thirty three percent (33%) of the local residents do not have a high school degree. Of those not having a high school degree, 26% were white and 40% were black.

In addition to the above factors, the South Carolina Commission on Alcohol and Drug Abuse conducted a statewide study of alcohol abuse to find that the Richland County area scored the highest consumption in the state. Nearly 60% of the adults 18 and over drink in comparison to the state average of 44%. University of South Carolina students, although not of age to drink legally, also consumed a lot of alcohol regularly. Seventy seven percent (77%) consumed alcohol in the last month compared to the national average of 78%. Seventy six percent (76%) of the students who abused substances were considered high risk for addiction. Of these students, 21% reported having parents who were problem drinkers; 25% also had other relatives who were problem drinkers; over 18% used marijuana and; an estimated 56% either had recently driven or ridden in a car while drinking.

According to the 1988 Uniform Crime Report, Richland County was ranked as follows compared to other S. C. counties:

Category	State Rank	# of Arrests
DUI	1st	1,898
Public Drunkenness	1st	4,254
Marijuana	1st	1,290
Cocaine	2nd	501
Disorderly Conduct	1st	1,217
Heroin	5th	52
Liquor Laws	3rd	1,246
Commitments to Prison	3rd	755

Overall, Richland County has the highest number of drug related arrests and second highest crime rate in the state. In addition, as one of the 46 counties within the state, this county experienced over 10% of the state's total adult alcohol related traffic fatalities.

At Lexington/Richland Alcohol and Drug Abuse Council, we see the effects of substance abuse every day. We are inundated with people wanting help. Schools, churches and community groups request programs and assistance in developing their own education and prevention programs. Individuals with substance abuse problems request counseling, detoxification and long term treatment. Presently, the waiting period for an assessment (to determine the extent of the substance abuse problem and refer to appropriate programs) is ~~three to four weeks~~. For those wanting detox and long term treatment the wait can be one to two weeks. Our detox unit has twenty five beds (eighteen male; seven female); on any given day our beds are full and there are twelve to fourteen applicants waiting for female beds and up to twenty five applicants waiting for male beds. The same holds true for our Transitional Care Unit (twenty eight day, inpatient program) which also has twenty five beds. There are often fifteen to twenty applicants waiting to enter this program as well. Once detox and long term treatment are completed the process of re-entering the community begins. Presently, we have one community residence (half-way house) to assist male clients only, during this transition period. For every admission to our community residence there are three more applicants waiting to get in. There is a desperate need for a community residence for women; currently none exists.

Approaches and Structures for Problem Solving

With a problem this complicated, one would hope there existed a comprehensive, integrated, aggressive approach for solving it. Sadly, this is not true. This is not to say that efforts have not been made; many laudable programs exist that have made significant contributions to reducing the drug problem. However, very little has been done to coordinate efforts into a comprehensive strategy that addresses all the areas. Even more frustrating, many groups fighting the problem are at odds with each other; we still fall victim to the fallacy that one single solution exists to combat the entire problem.

Here in the Midlands, some steps have been taken to facilitate the need for coordinated problem solving. The mayor of Columbia, South Carolina and the Lexington/Richland Alcohol and Drug Abuse Council have organized a Citizens Task Force called "Fighting Back for Greater Columbia". This group has worked diligently to identify the many different agendas, questions, issues, needs and problems in the Midlands area. The make-up of the task force includes law enforcement, school officials, media representatives, elected officials, substance abuse experts, community representatives, clergy and executives of major corporations. They have set as their mission to "...(1) Collectively analyze the problem from a coordinated, integrated approach; (2) Set achievable goals; (3) Determine areas of the community that need immediate attention; (4) Identify resources (both monetary, physical, time, and talent); (5) Develop strategies through brainstorming with experts; (6) Mount a comprehensive public awareness campaign to stimulate positive attitudes; (7) Provide oversight in the strategies developed to meet the goals; and (8) Assure that the efforts are kept alive and coordinated in the schools and colleges, neighborhoods, churches, and homes of the citizens." Although this group developed primarily in response to Lexington/Richland Alcohol and Drug Abuse Council's application to the Robert Wood Johnson Foundation for a grant, they have made a commitment to continue the process already begun, regardless of the outcome of the Robert Wood Johnson proposal.

On a regional level, several groups already exist that facilitate cooperation in policy making. In addition to the Chamber of Commerce and the United Way of the Midlands, the Central Midlands Regional Planning office has already proven invaluable in assisting Lexington/Richland Alcohol and Drug Abuse Council in creating the Robert Wood Johnson proposal whose primary goal is to"...institutionalize a planning and program development process which will drive the system for years to come." The recently formed Interagency Coordinating Council which consists of 54 community agencies, businesses, professionals and consumers, offers promise of much improved communication, coordination and cooperation among human service agencies within the Midlands area.

Another interesting possibility that has developed out of the Robert Wood Johnson proposal involves the South Carolina Commission on Alcohol and Drug Abuse (SCCADA). There already exists a planning process between SCCADA and all counties in South Carolina. Plans submitted by each county have traditionally been "agency plans" rather than "community plans". SCCADA has expressed interest in improving its planning efforts by developing a planning model to be used by other counties. This model would have counties expand their planning efforts beyond their individual agency to include the surrounding community.

It is time to stop forcing people in a single direction. To win the war on drugs, we must be more aggressive in bringing people together who are interested or have roles to play. We need to maximize energies and identify the resources available as well as the gaps in services. Most importantly, we have to create community awareness by publicizing our efforts. In addition to the above, we must recognize that short term and long term goals are necessary. Development of one, three and five year planning efforts addressing all aspects of the problem described above will keep us on track and moving forward in the war on drugs.

Conclusion

As our Federal government begins to implement its "National Drug Control Strategy" with an emphasis on supply reduction, we must make every effort on the State and local level to counter-balance with demand reduction efforts. For every shipment of cocaine that is stopped at the border (supply reduction), corresponding numbers of addicts will look for treatment as their supply network disappears (demand reduction). Even without increased interdiction efforts, the number of people seeking treatment still exceeds our ability to provide. The need exists; we simply have to do more to meet it.

Substance abuse is tearing our nation apart. It is no longer a singular problem limited to an individual's addiction to a chemical. The problem invades our neighborhoods, communities and schools. It affects the health care and insurance industries, the economic stability of American business and the function of our government, both local and international. It is absolutely necessary that we begin to educate the public about the complexity of the drug problem. Only then can we move on towards developing a comprehensive, coordinated approach to halting the personal, social, medical and economic devastation that occurs as a result of substance abuse.

ACCESS TO TREATMENT

Senator HOLLINGS. How can you quantify, Mr. Jameson, for the subcommittee when you say people are denied access into the program? How many, say, annually are in your two-county program, and how many go through it a year, and how many are denied?

Mr. JAMESON. We have right now about 9,000 people that go through the treatment part of our programs every year, which is about a 103-percent increase over 1980. It probably could have been two or three times higher than that had we been able to have the resources to deal with it. In our halfway house, we have one that has 20 beds, for every admission there are three others waiting in line to get in, and our detox center as I mentioned earlier, what we have is a 25-bed transitional housing kind of arrangement holding people from detox to get into other long-term treatment, for every person there is another one that is on a formal waiting list that we keep that we call every morning as soon as beds become available. Our outpatient programs have a 2- to 3-week delay in trying to get people in just to see someone to do an assessment on them. It's very difficult to say because we are not even counting the people that call in and want to know if they can get help but simply can't wait on a waiting list that end up in our emergency rooms, in some other facility, in jails and others. Just guessing, we could at least double what we have now, and I would say more likely triple the people that we are able to currently serve now that we could serve that are out there just in our area.

Of course, in Columbia we end up with a statewide catchment area because so many of the facilities are here locally.

EFFECTIVE MESSAGE

Senator HOLLINGS. Let me be the devil's advocate, Mr. McCord, in taking what Bishop James has said and let's contest that statement that the message is clear. The bishop talked eloquently about the pain and suffering brought on by drugs and that the message is clear. Psychiatrically they'll tell you that these controlled substances like cocaine, you don't get that headache like you get from alcohol, you don't get the stomach upset or anything else, or need a little nip the next day or anything to get over that hangover. On the contrary, in a sense, drugs like cocaine make you feel like a king, you feel wonderful, you feel like you are in charge. That is why it's not so much of a moral degenerative type threat to society.

Many a lawyer used to take, when I was coming along, before they talked to the jury a little nip to make them feel a little bit stronger and get their nerves and get themselves collected, now some take a little cocaine and it's into our professions, it's into the ministry and into the law, medicine and everywhere else in the world. When you say the message is clear, how do you really get it across. I know the influence and I agree with it, and it's a magnificent program, you have to get that awareness out there. You have to have the heroes of society lead the way, attract the youngster's minds and inspire them and what have you, but on the other hand, the fellow that takes it says, "Man, this makes me feel like a king and I keep on going." Right to the point, it's been told that one-half of our poets, some of the great writers are schizophrenic, suffer from panic attacks and otherwise, mental disorders. We know some are taking drugs as a result only when they have a panic attack or something else of that kind and it makes them feel secure and makes them feel good. It doesn't make them necessarily boisterous and everything else of that kind. So when you say the message is clear, how do you really teach young people that something that makes you feel good really is so very bad is what I am trying to get at? From your 30 years experience, is the education approach a valid and adequate one?

Mr. McCord. It is valid and it's adequate if you look at it in a broad sense. Many of those distinguished professionals and many of those distinguished poets died of either acute alcohol addiction or cocaine addiction, and many of those distinguished professionals who took a nip ended up in impaired professional treatment programs for lawyers and doctors and otherwise, and I think one of the things you always said, there are two diseases that catch up with people in Washington, one is bad backs and one is alcoholism. I will give you credit for saying that anyway.

But, what we try to tell kids, and they are going to live in a chemical environment, alcohol has been around since the beginning of recorded history. Probably at no time has it been more destructive than it is now but we have to teach kids of all ages how to live with these chemicals in a less destructive way. There are prescribed chemicals that you can legally take under the care of a doctor that deal with depression and anxiety and such as that. The fact is alcohol today, if it had to be certified by the FDA, it would never pass the test, it's too horribly destructive a drug to be called a legal drug.

Education about drug abuse is not just to tell them the dangers of using. The fact is the majority of children of today at some point in their life will use dangerous drugs, probably illegally, or legal drugs other than prescription drugs. The fact is, Senator, back when you and I used to talk about this, the average age of people who entered our treatment system was 45 to 63 if they were still alive. The average age entering the treatment system today for cocaine is 28 and going up, and 31 for alcohol and coming down. There is less chronic involvement of these diseases by the placement of programs out in communities where people don't have to be institutionalized is society's only response. We have that in South Carolina. That is an advantage we have over mental health where they have the institutions, and now they are worried about institutionalization. We never had the institutions in the first place, so we are lucky.

Corrections is going through the same thing trying to take us back to the community. One, you have to get people to find out that it's all right to have fun. I like to feel good, and if the only way I can do that is with chemicals, I am in trouble. I have used chemicals that made me feel good. I'm Presbyterian, I've had a glass of wine for medicinal purposes—Lutherans do that I understand—but if my only way to feel good is to be chemically induced, legal or illegal, I'm in trouble.

TEEN INSTITUTE

Your good wife has participated in the best feel good experience we put on, and that is called the Teen Institute. It shows kids that it's all right to have fun and feel good, but did you know you can feel good and be as happy as you have ever been without any chemicals. That you can do it by relating to other people and beginning to understand a sense of worth, a sense of serving other people, how good that makes you feel. We know that one day when it comes to legal drugs, if we can delay the onset of drug use to 21, we have one-half the problem fixed because you will have 21-year-old organisms that are much more able to play to use—in other words, it would be a physically, mentally, spiritually more mature organism then if you use cocaine, it might not have the devastating effect that it had for a 13-, 14- or 15-year-old.

The catch here is that people think education is a simple thing. "Just Say No" by itself will not work.

Senator **Hollings**. That is my point. I am trying to get the greater evil, or greater enemy. Somehow we've got to think of a more effective kind of educational approach other than the inspiration of fine leaders like Bishop James and yourself and others who have been working in the vineyards.

Mr. **McCord**. The closest thing we have found, Senator, is the Teen Institute experiment where we teach kids to go out and work with younger kids, and those kids, what they get out of that experience, lasts them the rest of their life and it gives them some skills, some feelings of self-worth, and the desire to go out and look for other alternatives.

Senator **Hollings**. The reason I make that point—and I am going to yield to Senator Rudman because we have to get along—what happens is that doctors will tell you, or at least have told me, and I am confident you are far more aware of it than I am, that alcoholism is one thing, and we work fine with the Alcoholic Anonymous and other groups, but to get a person off of cocaine is even far more difficult because they invariably have to lose their wife, lose their job, hit skid row and everything else before they really straighten out. It's hard to get them to that point. That is what I am told in any event.

Bishop **James**. I want to associate myself with the point that Dr. McCord makes, and the alternative is the thing which we show these young people, these children.

Senator **Hollings**. You say you show them a slide, what would be on that slide?

Bishop **James**. We show them how great it is winning ballgames. We show them how great they are getting a faster time in a track race. We show them many things that will get them higher and get them feeling good about themselves and get their interest. We show them young athletes getting medals pinned on them in the Olympics. We show them success.

Senator **Hollings**. Unfortunately, you and I are seeing just the opposite. I hope you don't cover this part with the kids, but the Olympiads who are winning now who have been on steroids and been on other kinds of drugs and now we're taken the medals off. You are getting to my point.

Bishop **James**. Some of them, but I think the media focuses, Senator, I believe you will agree, on the exception and magnifies that. There are hundreds of thousands of young athletes that have never taken a steroid, but we tell the young people that the price is not right. We say to them, we try to get that to them before they get to be a teenager, try to get it into their heads and hearts and into their spirit that the cost is too high to experiment with drugs. The price is not right. The risk is too dangerous—and it's working a little bit.

ALCOHOL ABUSE

Senator **Rudman**. I think Dr. McCord has a response he was going to give to Senator Hollings.

Mr. **McCord**. There are a lot of myths we deal with, and I know I sound like a broken record about alcohol, but alcohol is much more destructive to withdrawal. The chances of someone dying from alcohol withdrawal is many times greater than it is from heroin withdrawal or cocaine withdrawal. Back when you talked about the treatment outcome data, you mentioned 30 percent, he was talking about recidivism going back into prison from the general population. We had the courage to do a treatment outcome data. We didn't find anything earthshaking but at least we had the courage to contract with the university to do it.

We found out that after 6 months we had better abstinence, almost 63 percent of cocaine addicts, than we did of alcohol addicts after that. There are a lot of myths. In the 30 years I have been here, the things we held as the gospel 10 years ago now we absolutely discount, and there is a myth—remember when I talked about treating 50-year-old alcoholics, that means they had to be physically, mentally, economically, spiritually bankrupt, but that doesn't happen anymore. We have good young yuppies who are aspiring professionals, leaders, come in and say, "I have a problem."

I am saying that right now people who come in for treatment early on may experiment and relapse over a weekend and drink, therefore, that does not mean they are not a success because the weeks and months between that they didn't drink anything at all. The statistic of demand reduction you have to look at is that in South Carolina, and I am sure it's the same in the Nation, 4½ percent of South Carolinians consume over 50 percent of the absolute alcohol, and that holds just about true for illicit drugs. Those people are addicts. If you can just get 25 percent of those people through good treatment out of the pool, then you have reduced demand reduction for that substance by 25 percent.

You heard our law enforcement colleagues say "I heard a sheriff says it's been reduced by 50 percent because we made that bust of the ring." The trouble is, somebody else is going to come back into that ring. If you can bail out by successful treatment a small percentage of that pool, you are going to have less correctional costs, you are going to have less health care costs, you are going to have less lost production, so treatment pays as well as prevention is the point I wanted to make.

Senator **Hollings**. I agree with you. I am just trying to sell myself and determine how I could improve upon that education.

Senator **Rudman**. Well, you know the numbers here in your statement—I looked at your formal statement, Mr. Jameson, page 5. You have got close to 2,000 arrests for driving under the influence, about 4,000 arrests for public drunkenness. You have almost 6,000 items there, and then you come down and you have 1,200 for marijuana, 500 for cocaine. The problem you are addressing, Dr. McCord—and I agree with a lot of what you have to say—is how we do the question of education, because there is a mixed message out there. Bishop James has his program. You have your program. You put a very good message in front of these youngsters and, yet, they see something else. They see advertising on television which makes the consumption of alcoholic beverages look glamorous, something to aspire to; beautiful people with beautiful women and beautiful men driving beautiful cars and beautiful airplanes, wearing beautiful watches, staying at all the greatest hotels and just having one wonderful time drinking. At the same time they have examples in their own homes in many instances where they will go to one of your institutes or one of your sessions, be given a message about the evils of substance abuse and get home in time to see their parents finishing their third double martini on their way to dinner.

It's a problem that goes very deep into society. It's one that concerns me a great deal because of all the money we are putting into all of these programs, and I wonder whether we are getting the message across or whether we can, because, like it or not, alcohol happens to be legal in this country and these other substances are not, and I believe it should be that way. I am not one for legalization of drugs, although some are. I am totally against it for a number of reasons. I think it will open Pandora's box even wider. So I guess I have two or three questions. I did want to comment on that because I found your testimony very interesting. Bishop James, let me ask you this, you know it's hard to do any kind of quantitative analysis on success and failure, but to the extent that you are reaching a segment of the population through your church groups, how do you think you are doing with the ones you are reaching?

PROJECT ADAM PROGRAM SUCCESS

Bishop **James**. The measure that we are engaging our efforts by is the extent to which we are getting the youth participants themselves engaged in programs to do what we are trying to do, and that is succeeding dramatically. We had our first conference, statewide conference, and we prepared for some 300, and more than twice the number gathered, and we found an interest among youth who had been convinced from 14 years of age down, and some between 14 and 16 that we weren't expecting, that was very encouraging. So, I would say the answer is we are succeeding.

Senator **Rudman**. The other question of course is the very fact they belong to one of your churches might indicate the kind of a family background that would have the environment that might militate against the use of drugs. What do you do about the kids that don't belong to the church? How do you reach them?

Bishop **James**. That is the challenge, and this is what we are seeking all the time. You put your finger right on it. This is what we are seeking to get the youth to do, and we are open, we are learning, and every effort we can get to get the unchurched youngster who comes out of a different setting, but then sometimes it is the church youngster that is also the offender.

Senator **Rudman**. But the outreach of your youngsters who belong to your church certainly is the most effective way to get to those youngsters. Dr. McCord, what percentage of South Carolina public school students at any grade level receive some kind of drug education in some way?

DRUG EDUCATION

Mr. **McCord**. I would say 100 percent. It's mandated by law. I think I could comfortably tell you it's 100 percent.

Senator **Rudman**. What percentage of that do you think is adequate?

Mr. **McCord**. I couldn't tell you. I would say that generally speaking we have a strong school-based program. It is even stronger now. The Teen Institutes we have had, we have had almost 80 percent of all high schools participate in that. We have school intervention programs in all 91 or 92 school districts—they did away with one or combined it—that is the student assistance program dealing with grades 7 through 12 that kids in trouble with alcohol, drugs, sex, delinquency, rather than quarantine them to the street to get picked up, they are put in a system we administer.

Senator **Rudman**. What is your budget?

Mr. **McCord**. My budget? The State budget of the local system is somewhere around $24 million right now. Basically a community-based budget is $24 million. We spend in this State on an interagency basis, local and otherwise, somewhere around $35 million.

Senator **Rudman**. Is that including Federal funding?

Mr. **McCord**. Yes; that is Federal funding. We manage most of the Federal funds and contract it out to service and delivery at the local level or other agencies or other programs such as Bishop James'.

Senator **Rudman**. This has been very helpful. We hear it all in Washington. We hear from people sitting at the heads of major institutes, but we don't often get a chance to hear from people working in the field. I understand your problem, Mr. Jameson, and it's true all over the country. It's true in my own State of New Hampshire. There are waiting lines for people who are seeking treatment. That, we have to put an end to. If people want to be treated, we certainly ought to give them the treatment or else we are really not fighting much of a war. We are fighting a war with one hand tied behind our back and both legs tied. So I want to thank you all very much for your testimony. It's been very helpful. It will make a difference. This hearing will have an impact on some things we are going to do this year.

Senator HOLLINGS. No question about it, this has been one of the best we have ever had, because Senator Rudman and I are used to the rat-a-tat-tat of the numbers all being ground out by every agency, every department, every interest group in Washington. We can name them and give their testimony and I can write it out for them by now.

Senator RUDMAN. And I could give it without even seeing it.

SUBCOMMITTEE RECESS

Senator HOLLINGS. So all of this has been refreshing and impressive as a result. The subcommittee is indebted to each of you three, and the Reverend Washington, also. The subcommittee will be in recess until 9 o'clock in the morning where we will resume in Greenville, and let the record show my personal appreciation to Senator Rudman for being down here with us, and Mr. John Shank, the legal eagle.

[Whereupon, at 4:20 p.m., Monday, February 12, the subcommittee was recessed, to reconvene at 9 a.m., Tuesday, February 13.]

FEDERAL, STATE, AND LOCAL RESPONSE TO THE DRUG CRISIS

TUESDAY, FEBRUARY 13, 1990

U.S. SENATE,
SUBCOMMITTEE ON COMMERCE, JUSTICE, AND STATE,
THE JUDICIARY, AND RELATED AGENCIES,
COMMITTEE ON APPROPRIATIONS,
Greenville, SC.

The subcommittee met at 9 a.m., in the Greenville County Council Chambers, County Square, University Ridge, Greenville, SC, Hon. Ernest F. Hollings (chairman) presiding.

Present: Senator Hollings.

Also present: Congresswoman Patterson.

NONDEPARTMENTAL WITNESSES

Senator HOLLINGS. The subcommittee will come to order.

We are honored to have with us today our distinguished Congresswoman, Liz Patterson. She has been a leader in the war on drugs, and we invite her to sit with the committee. I know you have to go elsewhere in a little while, but any time you can give us, we appreciate very much. Please interrupt at any time to ask questions. That's the idea of coming home to the front line—informality generates even better information and knowledge on how we're going to solve this particular battle against drugs.

Yesterday, Senator Rudman and myself held our first in a series of three field hearings. Mr. Rudman had to return to New Hampshire last night and couldn't be with us this morning, but the committee record will show that the record stays open for any other questions by any other members of the subcommittee.

You only have to listen to what we heard yesterday, when special agent in charge of the FBI here in South Carolina, Mr. Fred Verinder, said in his early days with the Federal Bureau of Investigation, up in New York, he heard about the Greenville Boys' involvement in drugs. That surprised me. I'd never heard of the Greenville Boys. But he said they were the couriers, they were the manipulators, they were the ones handling the money in the drug business, from Greenville, SC. And, when you hear that the chief cash crop of your State now is marijuana, and law enforcement officers cry for education, you know you've got a real problem, and you know you're right here at the front line.

This committee itself handles the appropriations. As Congresswoman Patterson will tell you, it's different than when we served in the legislature in Columbia. In Columbia, we'd say there's a microphone, a table, and a chair, and it's hereby appropriated $100. In Washington, we say, "it is hereby authorized," and then you have to go all the way through the hearing process again and get your money from the Appropriations Committee. And that's the makeup of this particular Subcommittee on Commerce, Justice, State, and the Judiciary.

Of the some $10 billion for the war on drugs, we handle a good $4 billion, or perhaps nearer $5 billion when we include the judiciary, whether it be the Supreme Court, on down to the lower courts. Within the Justice Department, we fund the Federal Bureau of Investigation, the Drug Enforcement Administration, the border patrol, U.S. attorneys, U.S. marshals, the Bureau of Prisons, and State and local drug grants.

Last year, we passed President Bush's drug bill with some additional increases and now we want to see how it is working and how we can improve upon it this year. We particularly want to get, as Senator Rudman said yesterday, the information at the local level. In Washington, we hear testimony from the professional witnesses, as the Congresswoman will tell you, that give us a rat-a-tat-tat of nothing but figures, not too much experience; and we learn not what we should learn about needs at the local level.

We need to come home to assess the need. Here in South Carolina, we are what you might call a front-line State. We've got a tremendous coastline. The drugs come from South America, Florida, right up into our coast. We've got I-85, I-95, the north-south connectors; east-west on I-26. They're making the deliveries. And the drugs are in the schools, and in every walk of life.

I'm heartened by the attitude that I heard yesterday. The various Federal, State, and local agencies never did show any kind of jealousy or any kind of one-upmanship. Everyone was talking about how they were cooperating with one another. And that's only come about in the last years, in reality. The special agent in charge of the FBI, with his Federal organized crime and drug enforcement task force, Fred Verinder, is working with the head of our South Carolina Law Enforcement Division. They in turn are working with the judges, the solicitors, the prisons, and everything else of that kind, right on through from treatment and drug testing of the prisoners, right on up to the actual sentencing, with your own Judge William Wilkins as the Chairman of the Sentencing Commission.

As Judge Wilkins brought out very forcibly yesterday, we could be saving money on these mules or couriers coming in with the drugs by having instant deportation, whereby if they ever came back they would immediately serve time. It wouldn't pay them to ever come back in. After all, that's our purpose in the original incidence, rather than to become the custodian for *x* years in a long legal process at the Immigration and Naturalization Service level.

We found out our Customs agents will not get involved in any drug case that doesn't involve importation. I remember, back as Governor, the highway patrol was not able to leave the highways and stop a fire in our forests. Six out of ten acres in South Carolina are in forest. So, as Governor, we deputized all the highway patrolmen, set up an arson school down in Florence, SC, and, more or less eliminated forest fires in our State. We need to do a similar thing with respect to our Customs agents so they can work more intimately with local law enforcement.

The Drug Enforcement Administration is really underfunded and understaffed in our State. Incidentally, in 1988 the entire budget was $534 million for the Drug Enforcement Administration, whereby we made $614 million from seizures. So law enforcement pays; it's making money for the taxpayers. People don't realize it. Well, then, if it's making money, why are we not spending it? In the DEA's resident office in Charleston, rather than having seven agents, DEA cut back to five. But this subcommittee put into the language of its own appropriations that DEA get back up to seven. Yet, what we really need, as I'm sure I'm going to be hearing from you folks today, is at least 14, double that number.

I've come to listen. Let me yield at this time. Ms. Patterson, do you have anything that you would like to say? We welcome you to the committee.

Ms. PATTERSON. Thank you, Senator. I'm just glad to be here. I have worked with these gentlemen on many occasions before the hearings. And, as you said, they are on the front line; and I thank them for coming to share with us some information. I'm just pleased that I'm in town and I could attend.

Senator HOLLINGS. Very good. We have Chief W.C. Bain of the Spartanburg Police Department; Chief David M. Bridges of the Greenville Police Department; Sheriff Johnny Mack Brown of Greenville County; the Honorable Joseph Watson, the solicitor of the thirteenth circuit; and the Honorable George Ducworth, the solicitor of the tenth circuit.

Mr. Ducworth, we know you well, you and Mr. Watson both. And we have not yet heard from a solicitor. You are at a key spot, where you have got to prove a case. So you know where the gaps are—if there are any gaps—and where we can better coordinate, and where we can improve our assault on this war. Please let us know. We are glad to hear from you this morning.

STATEMENT OF GEORGE M. DUCWORTH, SOLICITOR, TENTH JUDICIAL CIRCUIT OF SOUTH CAROLINA

Mr. DUCWORTH. Thank you very much, Senator. It's very good to be with you today; and I commend you, Senator Hollings, and you, Congresswoman Patterson, for being here and having these hearings throughout the State and hearing from the people that are involved in the police work and in prosecution and in the prison systems, also. I think all three of those areas are very important in fighting the war on drugs.

I think it is very important to note the tremendous increase in the rate of crime that our State has experienced in the last decade—really more than a decade, but certainly during the eighties, there has been a tremendous skyrocketing of crime. The main reason for that increase, I think, is universally understood to be the drug problem. I've seen estimates anywhere from 70 to 80 percent of the crimes being somehow alcohol or drug related; but I think if you come to court and watch the people that come before the judge for sentencing, you will see that there are very few cases that, if you look deep enough into them, you won't see some connection between alcohol or drug abuse. So that is the key area to attack in the future, in getting the crime problem under control.

The criminals, I don't think, really are deterred by the criminal justice system as it is now, as they should be, mainly because we have been playing catchup with the criminals for a number of years now. I don't think any of the bodies that provide the funding for police departments or prosecution or prisons has realized the dire needs that we have, and I don't think they have given it the priority that it deserves. As a result, very few people that are out there committing crimes—I know I saw a report in U.S. News and World Report a few months back which gave the statistics on the number of criminals that get apprehended after they commit a crime, and the number is very low; and that's simply because there's not enough policemen, not enough manpower out there to catch them.

If they are lucky enough to catch them, when it comes to the prosecution stage, we don't have the manpower and the court time to deal with them like we would like to deal with them, and get the substantial sentences that we would like to get. And of the few that we do get substantial sentences on, once they get to the prison systems, the prison system is tremendously overcrowded; and they have to turn them out much quicker than, I'm sure, they would like to, simply because they don't have anyplace to put them.

I'd like to share one statistic that I find quite startling in our county, and I don't think Anderson County is drastically any different from anywhere else in the State. As you probably know, we're building a new courthouse in Anderson now. A couple of years ago we wrote to the court administration to help us to estimate how many courtrooms we would need in the next 10, 20, or 30 years. Well, at the current time we are using one courtroom about 26 weeks a year for criminal court; and they estimated that if the crime rate continues to increase at the same rate that it has since 1978, then by the year 2020 we would need 357 terms of court a year, which would mean seven courtrooms going year-round. It's very obvious that there's no way in the world that we can continue to support any kind of system like that, the prisons that would be needed, or anything like that.

So I think we are at a very critical stage right now. If we get the proper funding that we need now and put the proper emphasis on it, we can get the problem under control. But it's something that we're going to have to face head-on; and we are going to have to face it head-on within, I think, the next 5 years, to be able to get a handle on it, or we'll never get control over it.

We certainly need more personnel in police work and prosecution. We need more prison space; there's no question about that. We need to have better training and education facilities for our police officers and for us. There are a number of good schools that prosecutors can go to now, mainly put on by the National College of District Attorneys and other organizations like that; but they are very costly to go to, and, quite frankly, we don't have the time to allow those people to be away from their jobs to go to them to get the training. So I think it would be real helpful if we had more training close for our people.

If we can provide better pay for them, I think we can hold on to prosecutors longer. As it is now, solicitors' offices are basically a training ground for trial lawyers, for the most part. Most lawyers go to solicitors' offices and spend 2 or 3 years, maybe 4 years, just honing their trial skills; and then they go on into more lucrative private practices. So if we could have better pay, better incentives for people to become career prosecutors, I think that would be a big help.

I don't think too much emphasis can be put on building more prisons, providing money for more prisons. I noticed that in the next 3 years our State is contemplating spending $180 million to build prisons to house the estimated 9,000 more prisoners that they feel we'll have in that 3-year period. It's very frustrating for us at our level—and, I'm sure, for police officers, also—to work hard to get a serious criminal convicted and get a substantial sentence for him, and then see him back out on the street through some early release program, in a short period of time. I know if we get a 25-year sentence on somebody—25- or 30-year sentence, it's not unusual for that person to make a work release program and be back out in the community in even less than 3 years on a lengthy sentence like that. I have heard of people being on the street in 29 months on a 25-year sentence. So it doesn't do that much good to have stiff penalties if we don't have the prison space to hold them. The prison system has no choice but to release these people because they don't have anywhere else to put them.

So, I think, in addition to providing the funding for police, for us, and for having good, stiff sentences, we've got to have somewhere to keep those people. If we put emphasis on all three of these levels, I think within the next few years we can start being more of a deterrent to criminals. If we can let them know that if they commit a crime, they are going to be caught, they are going to be tried in court in a short time, they are going to get a substantial sentence, and they are going to stay there and serve a good portion of that sentence, then I think that will start having a deterrent effect, and the crime rate will go down. But it's something that we have got to do very quickly, or we're going to lose complete control of the criminal justice system up here.

PREPARED STATEMENT

Senator HOLLINGS. Thank you. We will place your statement in the record at this point.

[The statement follows:]

STATEMENT OF GEORGE M. DUCWORTH

Crime skyrocketed throughout our nation during the 1980's. Without a doubt the major cause for this tremendous increase is drugs. Estimates vary greatly as to the percentage of our overall crimes that are drug related. I have seen estimates of 70 percent and even 80 percent. I would venture to say that if you examine each defendant closely enough, you will see that alcohol or drug abuse plays some part in almost all crimes, at least 85 to 90 percent.

People throughout our nation feel the war on drugs has been lost; their irresponsible solution is to legalize them. It has been proven a difficult, if not impossible, task to cure addictions. Therefore, it seems incredible to me that the government would even consider legalizing these drugs.

The rapid growth of crime has overloaded the Criminal Justice System and we have neither the personnel nor facilities to accommodate this increase. Our governing bodies which provide the funding have not, until recently, realized that we have reached a time of crisis in dealing with crime. Numerous studies reveal that many of the crimes committed do not result in an arrest. Out of the crimes that do reach the prosecution stage, those that are prosecuted do not receive a significant sentence. This means that a person can commit a crime and feel confident that he will not lose his freedom. In order for the Criminal Justice System to work, it is imperative to deter people from committing crimes. Under the present system this has not been accomplished.

It is frustrating for law enforcement to spend all their time investigating breakins, knowing that if they had adequate manpower they could stop crimes before being committed. It is even more frustrating when they apprehend a criminal, who is supporting his drug habit by robbing our communities blind, set free or receive a light sentence in court.

Prosecutors are frustrated, too. We cannot spend adequate time preparing and trying these criminals because of the tremendous number of cases and the limited court time. The end result is usually a plea bargain which gives the defendant a lesser sentence. Because of prison overcrowding, a defendant who receives a lengthy sentence is back on the streets in a short period of time due to early release programs.

We are currently building a new courthouse in Anderson County. In preparing for this new building, a letter was written to the South Carolina Court Administration asking for estimates as to the need for courtroom space in the next 10, 20 and 30 years. To date, we have only one courtroom to use for criminal and civil court. We received a response which stated that if the crime rate continues to increase as it has since the late 1970's, we would need to hold court the year round, requiring seven courtrooms by the year 2020. As a result, we need to examine the problem, determine what is causing it, and find a solution.

Criminals must be convinced that if they commit a crime there are enough well-trained officers, aggressive prosecutors, judges, court time and enough prison space to assure them that they will be arrested, brought to prosecution and will serve adequate time for the crime committed. If we can accomplish this, the crime rate will decrease and America can return to a nation whose citizens are truly free again. Drugs have held these citizens prisoners in their own homes for too long.

I realize the federal government has significantly increased its funding to the Criminal Justice System in the last couple of years. It is very important that more money reaches the state and local levels. This is where the vast majority of criminals are dealt with. The biggest cost seems to be that of building more prisons. South Carolina is faced with coming up with $180,000,000 to construct prisons just to cover the expected need for the next three years. It is urgent that we have more federal dollars available.

Also, it would be helpful to have more convenient and affordable training for law enforcement and prosecutors. Currently there are some outstanding seminars and schools throughout the country, but because of our limited budgets and tremendous workloads, we are not able to allow our personnel to attend.

We can win this war on drugs and crime. Citizens are realizing more now than ever before how serious this problem really is. The polls show that the Number One concern is drugs. Today, children are being educated concerning the danger of drugs. This effort, along with a Criminal Justice System, which seems on the verge of receiving the attention it has so long needed, can bring about the knock-out punch in the war on drugs.

Senator HOLLINGS. Very good. I'm going to withhold questions, unless you have some, to see if we can hear from everyone on the panel. Mr. Watson.

STATEMENT OF JOSEPH WATSON, SOLICITOR, THIRTEENTH JUDICIAL CIRCUIT OF SOUTH CAROLINA

Mr. WATSON. Senator, let me first of all say I am honored and humbled to be here and participate in this hearing. Let me commend you and Congresswoman Patterson for not only your strong stand on the fight against drugs, but also your strong support for law enforcement. Everybody in this room really appreciates that.

As you mentioned, Greenville's history with drugs is less than an illustrious one. As you heard yesterday, I think it was back in the seventies, we had 3 of the top 10 heroin dealers in the country that were from Greenville. The sheriff and Mike Bridges can help me with names. Cody Griffin and Blue Burnside were two of them. I'm not sure who the third one was.

Mr. **Bridges**. Star.

Mr. **Brown**. Louie Star.

Mr. **Watson**. Louie Star, that's right. But our history is not good. You invited a prosecutor, so I'm going to give you a prosecutor's perspective on things. I think that some of the solutions, most of the solutions, probably come from county governments and also from State governments, but some of the solutions can come from Washington; and we would appreciate any help that you can give to us.

I think that I am in more of a position, probably, than just about anyone in the State of South Carolina to see what is the biggest problem that is facing the State judiciary. The reason I say I'm in more of a position is we historically prosecute more cases in this circuit than anywhere else in the State. For about the last 15 years, we have gained more convictions than anywhere else. To put that in perspective, we gained more convictions in Greenville alone than Richland County and Charleston County combined last year. So what I see is a tremendous problem; the biggest problem facing the judiciary is a growing backlog of cases, and that relates directly to the increase in drug cases that are being made and given to us to prosecute.

You mentioned the professional witnesses who gave you a rat-a-tat of figures. I'm going to give you some figures, but I hope you will bear with me because I think they are very important. Basically, if you can just visualize a graph, you would see several lines on the graph. Every year we gain more convictions; we increase the number of convictions. We're working with basically the same number of weeks of court because there are no more judges to go around, and there are no more courtrooms right now. So we were allocated a certain number of weeks of court, and every year we get a little bit more efficient and we squeeze maybe another 10 to 15 percent increase in cases out of a single week of court, and our number of convictions increases.

But, unfortunately, the number of cases that are assigned to us for prosecution has dramatically increased. That causes the third line, that is, the number of cases that are pending for us to prosecute, or the backlog of cases, to increase. The backlog is increasing at a far greater rate than our conviction rate.

Convictions have risen, just to give an example, from 1985 to 1988, from 3,700 to 5,100 in Greenville County alone. The number of cases we have received to prosecute in general sessions court in 1987 was 7,100; 1988 was 9,550; 1989, last year, was 10,942. In a 2-year period of time, I received a 54-percent increase in the number of cases for my office to prosecute. That is cases that these two gentlemen on my left make, send to me for prosecution—a 54-percent increase.

George was telling you the number of cases. I don't think we need to debate the issue. Basically, it's 1 out of 5, or it's about 22 percent of the cases that I get to prosecute now, are drug cases. I'm talking about possession, distribution, trafficking, manufacturing, those kind of cases—22 percent. Obviously, when you talk about drug-related cases, you're talking about a much higher figure. George said the figure of 70 to 80 percent; I think that's a realistic figure.

What has that done? The backlog from January 1, 1987, we had 2,600 pending cases; on January 1, 1990, we have 6,917; almost triple the backlog of cases we have to prosecute. So we're getting more efficient and we convict more, but the number of cases we get to prosecute has gone up 54 percent in 2 years; therefore, our backlog increases.

What does that do? You can do two things to fight a backlog. You can compromise justice; you can plea negotiate, plea bargain, give them lighter sentences. We do not do that. Consequently, what happens is the cases get older and older. You go from, on an average case, an average of 5 or 6 months from date of arrest to conviction; now we're working on about 10 months. And if we don't see relief, it's going to get older and older. We're going to be working on 1 year, 1½ years, 2 years, whatever, if we don't get the relief we need. That's not fair to the defendants.

We can't keep these people in jail. We've already talked about the jail overcrowding problem. That's the same problem we have in our local detention centers. We can't hold these people in jail, so we're turning the drug dealers back out on the street. They continue to deal drugs. We arrest them again. Before we get them to court on the first case they were arrested on, they are arrested again on another drug distribution charge.

It's not fair to the victims of these crimes. It's not fair if you get assaulted or your house gets broken into. It's not fair to you to have to wait 1 year before you go to court to get this drug dealer that broke into your house.

I will tell you that the problem is not unique in Greenville; it is a statewide problem. From 1981 to 1989, the number of convictions in the State doubled from 33,000 to 67,000; but, unfortunately, the backlog of cases increased five times that figure. We now have in the State some 31,370 cases that are pending. That was as of January 1990.

Now, again, I realize all the solutions don't lie in Washington, and we can't turn to Washington to answer all our problems. The State, obviously, with Hugo, doesn't have much money to dole out this year to prosecutors, although the Governor put in his State of the State that the prosecutors needed more money. The State solicitors have been allocated, over the last 6 years, basically the same amount of money, 75 cents per capita, that was allocated to our offices.

Obviously, there is an emphasis on drugs; there is an emphasis on drug fighting. Our county councils and city councils are giving law enforcement tools and personnel to go out and fight these people. The more eyes and the more ears you put on the street, the more cases they're going to make, which makes more cases we're going to be given to prosecute.

As I mentioned, the answer lies in county government, and our county council is addressing that issue. We need more courtrooms.

Even if I had more judges right now, I don't have the courtroom space to hold the courts. We've got three courtrooms in Greenville. Those three courtrooms go virtually all the time. We need another courthouse. County council is addressing that problem.

We need more judges, and the State is addressing that problem. Currently, there is a bill to create nine new judges. That is a minimum of what we need; I would say we need more.

What I would like to see out of Washington is, if you're going to give money to law enforcement—you talk about this assault, you talk about this war on crime; it does nothing if we can't get these people in the courtroom. What I'd like to see is more grant money available to the States, to the local prosecutors, for drug prosecutors. Because if we're going to handle this caseload, we not only need the courtrooms and the judges, we need the prosecutors.

PREPARED STATEMENT

Senator HOLLINGS. Good enough, Mr. Watson. Thank you. We will place your statement in the record at this point.

[The statement follows:]

STATEMENT OF JOSEPH J. WATSON

Greenville, South Carolina, once the hunting grounds of Cherokee Indians, was established in the late 1760's as a trading post and grist mill on the Reedy River. Today, Greenville County, which covers 789 square miles, is South Carolina's most populous county and is the center of a market area serving more than a million people.

Greenville, like almost every other area of the country, has experienced a dramatic increase in crime—an increase which unquestionably is both directly and indirectly tied to drugs. Over a three year period, from January of 1987 through December of 1989, the Greenville County Solicitor's Office secured 16,550 convictions. During the first quarter of 1989 alone, 1,904 criminal convictions were recorded. Total convictions for 1989 were 5,134; of these, 1,055 were for drug offenses.

In 1989, vice and narcotics officers assigned to the Special Operations Unit of the Greenville County Sheriff's Department logged 28,967 man hours resulting in the arrest of 566 individuals on 898 criminal charges. During this same time period, Greenville Police Department vice and narcotics officers made 684 drug related cases while seizing $77,604.00 worth of narcotics. The Special Operations Response Team of the Police Department made 1,330 arrests, 615 of which were General Sessions cases.

These numbers may not appear to be staggering, but their significance becomes clear when one focuses not only on the individuals arrested but on the contraband seized. During 1989, County Vice officers seized 988 grams of cocaine valued at $89,367.00; 3,349 grams of crack cocaine valued at $56,492.00; 19,979 grams of marijuana valued at $54,475.00; and 8,523 marijuana plants valued at $8,523,000.00. When one acknowledges that, in spite of the efforts of law enforcement, only a small portion of drug distributors and drug users are being arrested, one is left with the inescapable conclusion that massive quantities of cocaine and marijuana remain on the streets and in the rural farmlands of Greenville County.

Law Enforcement is faced with the problems of conducting long-term, complex investigations targeted at upper level distributors while attempting to stem the flow of street corner dealers. Just this month, Sheriff's Department vice officers concluded Operation Blackhawk, resulting in the arrest of 18 individuals and the seizure of 2 kilograms of cocaine, $20,000.00 in cash and assorted weapons and contraband. This two-year long investigation is believed to have netted members of the organization responsible for supplying up to 90 percent of the cocaine provided to Greenville's black community.

From May through November of 1989, city vice officers working with the State Law Enforcement Division and the Governor's Raid Team, conducted Operation Houseclean which placed an undercover operative in a local housing project to make controlled buys resulting in the arrest of 135 defendants on 408 criminal charges. Vice officers also conducted numerous "Reverse Sting" Operations targeted at the drug buyer rather than the distributor. Undercover officers worked local areas known as drug distribution points, posing as street dealers, leading to 225 convictions for attempting to possess crack cocaine.

An average week in General Sessions (County Criminal) Court makes it immediately apparent that Greenville's drug problem is not strictly confined to those defendants charged with possession or distribution of drugs. Cocaine, crack cocaine, marijuana and heroin figure prominently in a significant number of property crimes ranging from shoplifting to grand larceny.

Young men and women stuff razor blades and cigarettes in their pocket to fence to support their habits. Small gangs of juveniles smash car windows to steal radios and radar detectors to support their habits.

Street violence has accelerated as drug dealers defend their corners, and aggravated assaults and homicides are the results of drug deals gone bad. Where drugs are bought and sold, illegal weapons will be found. In 1989 alone, county vice officers seized $10,400.00 worth of assorted illegal weapons.

In November of 1989, a 23 year old black male, desperate for money to buy crack cocaine, inveigled his way into the home of his 77 year old neighbor where he bashed her head in with a large rock, raped and robbed her and left her locked in her home where she remained alone and in shock for 17 hours. He admitted to police that he knew she would refuse to give him money for drugs and that she could and would identify him. He described in detail how he paced in front of the home knowing that money was there, knowing he had to have it to buy crack, and knowing he would have to kill her in order to avoid detection. As a result of a five month addiction to crack cocaine, this young man with no prior criminal record is facing a potential sentence of life in prison plus 75 years.

The loss of life and property, while significant, is not the only factor to be considered. The economic consequences are self-evident, but the judicial consequences of the ever increasing drug problem, while more subtle, are phenomenal. Court systems are grinding to a standstill, unable to process the ever increasing case load. In 1988, prosecutors in Greenville County recorded 5,106 criminal convictions during 43 terms of General Sessions Court at an average rate of 13 convictions per court day. In 1989, during an identical 43 terms of court, 5,134 convictions were recorded. This tremendous docket overload results in a six to eight month gap between date of arrest and disposition.

Greenville, South Carolina, unfortunately, is not unique. It is a county with a problem, a drug problem. There is no simple solution just as there is not one solution. More drug education, more drug enforcement, more drug prosecution—all are necessary.

STATEMENT OF JOHNNY MACK BROWN, SHERIFF, GREENVILLE COUNTY SHERIFF'S OFFICE

Senator HOLLINGS. Now Sheriff Johnny Mack Brown.

Mr. BROWN. Mr. Chairman, Ms. Patterson, I will be very frank and direct in my remarks. First of all, I thank you for allowing me to share our concerns over the national drug strategy and the drug problems in our community.

In our community of Greenville, in the foothills of the beautiful Blue Ridge Mountains, there are crack cocaine addicts who support their daily habit with burglaries, thefts, and assaults. Disputes over cocaine sales have resulted in numerous murders, and have spread fear throughout our community. Heroin addicts contribute to this cancer as they commit their own desperate crimes to feed the monkey on their backs. Addictive drugs are unraveling the fabric of our community, and driving the cost of State and local criminal justice systems so high that none of us can see the end to it.

I don't like to describe law enforcement actions as a war on crime, first of all, because in most cases there is no clearly defined, uniformed enemy and, second, because it would have to mean that we are at war with our community. War is a term that rarely truthfully describes American law enforcement efforts to prevent or reduce criminal activity by our citizens.

However, gentlemen and Ms. Patterson, coca leaves don't grow on palmetto trees, and opium poppies don't grow in the beautiful Blue Ridge Mountains. They are produced thousands of miles away from this country and transported here by the tons on a steady schedule. Planes fly in and drop their deadly cargo and fly off with impunity. Foreign cartels have deliberately targeted this country, addicted hundreds of thousands of our young people, and produced numerous firefights in our communities.

Bluntly, these foreign, addictive drugs are ruining our communities because of the failure of the Federal Government. And, no, I don't mean we need the Federal Government in running our local governments or policing our streets. We can simply do our job quite well, if the Federal Government does its job. How are local sheriffs and chiefs expected to eliminate the rising tide of drug violence, when the Federal Government cannot close the floodgates that are drowning us with drugs? It is the job of the Federal Government to protect our national borders, and it has not been done. We have limited resources on a local level, and we use every one of them. The Federal Government has the Army, the Navy, the Air Force, and the Marines of the most powerful country in the world. And yet there is an extreme reluctance to use them in a clear-cut effort to protect our borders. We don't want to offend certain countries, or we don't want to hurt their pride. Leaders in the Pentagon don't want to use expensive weapons on anything but a real war. Well, while the State Department diplomats busy themselves fussing over not offending certain countries, those same countries are busy exporting death to the American citizens. And our communities are beginning to look more and more like real battlefields. I'm glad that the Pentagon has started to move in the right direction, but it must be done with a no-nonsense, all-out effort.

When is the Federal Government going to realize that we cannot apply American criminal justice standards to foreign nationalists who are waging war on our country? We will never win. That's why you can pour millions of dollars into Federal law enforcement, new prisons, new treatment centers, and never begin to stop the drug problem in this country.

Not long ago we were treated to the sight of our President and his senior advisors rushing to insist that our military advisors, being used to help suppress drug traffic, will not be placed in areas where they are in danger or, good heavens, where they might actually have to shoot a drug dealer. My deputies are placed in that situation every day. Why on Earth are we afraid to admit to anyone that we are going to defend ourselves by attacking those who attack us first?

Those of us in local law enforcement have been fighting hard to protect our communities by guarding the backdoor of the fort. When we looked up to find ourselves surrounded by the bad guys, we find that the Federal Government has left the front gate wide open. We absolutely have to start taking a different attitude concerning our national borders. This is no time to cater to special interest groups over illegal immigrations policies. The matter is survival.

What we need is firm, decisive action on the national level. What we see is political posturing. If the Federal Government, the President, and Congress cannot bring themselves to fight this war with the intention to win, then this is a wasted effort, nothing more than a political sideshow. What we see is a national drug strategy beginning to look more like a political football game being kicked between political parties, and we begin to have our doubts. Those doubts become even stronger when we see some Members of Congress eagerly vying to promote their drug programs, when they indignantly protest the reduction of funds to come to one of their favorite programs, made in order to help pay for drug enforcement. In fact, if most of the current Federal assistance programs were eliminated, it wouldn't cause nearly the amount of damage that addictive drugs have and will continue to cause, unless we eliminate them. We cannot fight a national effort and pretend that business is as usual. Where are our priorities? We all must sacrifice. Our local budgets for education and community improvement are being drained to support the arrest and incarceration of criminals riding the floodtide of foreign addictive drugs. Where are our priorities?

For its part, the Greenville County Sheriff's Office is using sophisticated, undercover operations, as well as national nontraditional law enforcement, to detect and interrupt the local drug market. We have studied the market dynamics of each of the most serious drugs, and concentrate our efforts on the weakest link in the market chain. We attempt to deny them secure areas by using housing codes enforcement against crack houses. Some areas are being pacified, cleaned up, and restored to normal community control. We are using civil, as well as criminal laws, to attack other locations. We are using State seizure laws to deny drug dealers the benefits of their profits. If you measure success by arrest, seized contraband, and broken organizations, then these tactics are successful, with our contraband seizures running in the millions of dollars. We also operate, in conjunction with the Greenville School District, the Drug Abuse Resistance Education Program called DARE, a program in our schools, believing that this is the long-term investment in the reduction of drug consumption by our young people. We must place even more emphasis on the demand reduction through education. As part of our community oriented law enforcement concept, we make active referrals for drug and alcohol counseling.

All of these things we can and are doing, and they can be successful against the drug organizations and individuals currently active in our communities. On a local level, we can begin to reclaim our communities from drug dealers. However, we cannot ever hope to do this until our national leadership decides to shut off the spigot of drugs coming into this country. With the drug flow wide open, for every dealer we bust and imprison, two more will take his place. It's just too profitable. They will keep going on, no matter what the risk, as long as there are drugs to sell—and that's the point. Right now, local governments are in a revolving door, and we cannot get out. Shut down the flow of drugs into our country, and we will do the rest. In other words, we are strong enough and capable enough to go in for mopup operations, as long as the Federal Government holds the perimeter.

Casualties are a product of war, but so far in this one, it seems Americans have done most of the dying, even though our Government is not under direct attack or assault like Colombia's. However, we need to recognize the fact that groups of men organized for the purpose of exporting addictive drugs to our people are committing nothing less than an act of war against our people. It's time we acted on that, and officially directed the combined might of this country against the total destruction of these organizations, whatever they might be. This must be total. The enemy must be subject to attack anywhere in the world. There must be no sanctuary for drug dealers.

That's what it's going to take. Anything less is a clear signal that we aren't ready to win the fight.

Then the question comes, how many more communities have to be ripped apart? How many more of our young people will be addicted or killed until we are willing to make this commitment?

From all of us, Senator, I hope we're ready now. Thank you.

PREPARED STATEMENT

Senator HOLLINGS. Very good. I appreciate it.

[The statement follows:]

STATEMENT OF JOHNNY MACK BROWN

Mr. Chairman, and members of the Senate Subcommittee, thank you for the invitation to share our concerns with you over the National Drug Strategy and the drug problem in our community. I will be frank and direct in my remarks to this Committee.

In our community of Greenville, in the foothills of the beautiful Blue Ridge Mountains there are crack cocaine addicts who support a daily habit with burglaries, thefts and assaults. Disputes over cocaine sales have resulted in numerous murders, and have spread fear throughout the community. Heroin addicts contribute to this cancer as they commit their own desperate crimes to feed the monkey on their back. Addictive drugs are unraveling the fabric of our community, and driving the cost of State and local criminal justice systems so high that none of us can see an end to it any more.

I don't like to describe law enforcement actions as a "war on crime," first of all, because in most cases there is no clearly defined, uniformed enemy and, second because it would have to mean we are at war with our own community. "War" is a term that rarely ever truthfully describes American law enforcement efforts to prevent or reduce criminal activity by our citizens.

However, gentlemen, coca leaves don't grow on the palmetto tree, and opium poppies don't grow in the Blue Ridge. They are produced thousands of miles away from this country and transported here by the tons on a steady schedule. Planes fly in and drop their deadly cargo and fly off with impunity. Foreign cartels have deliberately targeted this country, addicted hundreds of thousands of our young people, and produced murderous firefights in our communities.

Bluntly, these foreign, addictive drugs are ruining our communities because of the failure of the Federal government. And, no, I don't mean we need Federal help in running our local governments or in policing our streets. We can do our job quite well, if the Federal government does its job. Frankly, the Federal record is extremely poor so far. How are local chiefs and Sheriffs expected to eliminate the rising tide of drug violence, when the Federal government can't close the floodgates that are drowning us with drugs? It is the job of the Federal government to protect our nation's borders, yet it hasn't been done. We have limited resources, and we use every one of them. The Federal government has the Army, Navy, Air Force and Marines of the most powerful country in the world. Yet, there is extreme reluctance to use them in a clear-cut effort to protect our borders. We don't want to "offend" certain countries—we don't want to hurt their "pride." Leaders in the Pentagon don't want to use expensive weapons on anything but a "real" war. Well, while State Department diplomats busy themselves fussing over not "offending" certain countries, those same countries are busy exporting death to American citizens. And, our communities are beginning to look more and more like "real" battlefields. I am glad that the Pentagon has started to move in the right direction, but it must be done with a no-nonsense, all-out effort.

When is the Federal governmnt going to realize that we cannot apply American criminal justice standards to foreign nationals who are waging war on our country? We will never win that way. That's why you can pour millions of dollars more into Federal law enforcement, new prisons and treatment centers and never begin to stop the drug problem in this country.

Not long ago, we were treated to the sight of our President and his senior advisors rushing to insist that our military advisors, being used to help suppress drug traffic, will not be placed in areas where they are in danger or, good heavens, where they might actually have to shoot a drug dealer! My deputies are placed in this situation every day! Why on earth are we afraid to admit to anyone that we are going to defend ourselves by attacking those who attack us?

Those of us in local law enforcement have been fighting hard to protect our communities by guarding the backdoor of the fort. When we looked up to find ourselves surrounded by the bad guys, we found the Federal government had left the front gate standing wide open. We absolutely have to start taking a different attitude concerning our national borders. This is no time to cater to special interest groups over illegal immigration policies. This is a matter of survival.

What we need now is firm, decisive action on the national level. What we see is political posturing. If the Federal government, the President and Congress cannot bring themselves to fight this war with the intention to win, then this is a wasted effort, nothing more than a political sideshow. When we see the "National Drug Strategy" beginning to look more and more like a political football being kicked between the two political parties, we begin to have our doubts. Those doubts become even stronger when we see some members of Congress eagerly vying to promote "their" drug programs, and when they indignantly protest the reduction of funds to one of their favorite programs, made in order to help pay for drug enforcement. In fact, if most of the current Federal assistance programs were eliminated, it wouldn't cause nearly the amount of damage that addictive drugs have and will continue to cause, unless we eliminate them. We can't fight a national effort and pretend that business is as usual. What are our leaders' priorities? We all have to sacrifice. Our local budgets for education and community improvement are being drained to support the arrest and incarceration of criminals riding the flood tide of foreign, addictive drugs. What are our leaders' priorities?

For its part, the Greenville County Sheriff's Office is using sophisticated, undercover operations as well as nontraditional law enforcement, to detect and interrupt the local drug market. We have studied the market dynamics of each of the most serious drugs, and concentrate our efforts on the weakest link in the market chain. We attempt to deny them a secure area by using housing codes enforcement against crack houses. Some areas are being pacified, cleaned up and restored to normal community control. We are using civil, as well as criminal laws, to attack user locations. We are using State seizure laws to deny drug dealers the benefits of their profits. If you measure success by arrest, seized contraband and broken organizations, then these tactics are successful, with our contraband seizures running in the millions of dollars. We also operate, in conjuction with the Greenville County School District, the Drug Abuse Resistance Education (DARE) program in our schools, believing this is a long-term investment in the reduction of drug consumption by our young people. We must place even more emphasis on demand reduction through education. As part of our community-oriented law enforcement concept, we make active referrals for drug and alcohol abuse counseling.

All of these things we can and are doing, and they can be successful against the drug organizations and individuals currently active in our communities. On a local level we can begin to reclaim our communities from drug dealers. However, we cannot ever hope to do this until our national leadership decides to shut off the spigot of drugs coming into our country. With the drug flow wide open, for every dealer we bust and imprison, two more will take his place. It's just too profitable. They will keep going no matter what the risk, as long as there are drugs to sell—and that's the point. Right now, local governments are in a revolving door, and we can't get out. Shut down the flow of drugs into our country, and we will do the rest. In other words, we're strong enough and capable enough to go in for mop-up operations, as long as the Federal government holds the perimeter.

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That's what it is going to take. Anything less is a clear signal that we aren't ready to fight and win.

Then the question becomes how many more of our communities must be ripped apart? How many more of our young people will be addicted or killed until we are willing to make the commitment?

For all of our sakes, I hope the answer is, "we are ready now!"

STATEMENT OF DAVID M. BRIDGES, CHIEF OF POLICE, GREENVILLE POLICE DEPARTMENT

Senator HOLLINGS. Chief Bridges.

Mr. BRIDGES. Senator Hollings, Ms. Patterson, we appreciate your coming here to listen to us.

The growing drug abuse epidemic in the United States has certainly had an impact on South Carolina and more specifically the Greenville area. It is very clear that no area in the United States is immune from this growing problem. It is also clear that no one ethnic group, profession, economic group, or graphic area is solely affected. No one can isolate themselves from the growing drug crisis.

Since 1984, drug traffic has been on an incline in the Greenville area. Cocaine abuse, by any method, especially the potent form of crack cocaine, has steadily increased. From the year 1984 through 1988, the volume of drug cases has increased substantially, primarily due to the introduction of crack to the Greenville area in late 1987.

In realizing the need to respond to this growing drug problem, the Greenville Police Department has for the last 1½ years concentrated on high visibility drug traffic areas. These areas, primarily lower income, have a large amount of curbside drug sales of crack cocaine. We have approached this problem by addressing the drug demand.

This is accomplished by carrying out reverse sting operations which identify the buyers of these illicit drugs. We place undercover police officers on the street corners in these high visibility areas where curbside drug sales are taking place. As buyers approach the undercover officers and solicit for a sale of a controlled substance, they are placed under arrest by backup officers and charged with attempting to possess the substance they inquired about. Frequently, the buyers will carry out the purchase and take possession of a fake substance that the officers had which resembles the actual drug.

As a result of this enforcement technique, over 450 individuals have been arrested for attempting to possess illegal drugs in the last 1½ years. Of these 450, only 6 have been repeat offenders.

Combined with the effort of addressing the drug demand, the Greenville Police Department has targeted street distributors and suppliers who frequent these high visibility drug traffic areas to peddle their goods. Through covert undercover operations that have run for periods of 2 to 6 months, we have attempted to eliminate the distribution and supply of street level drugs in specific areas within our community.

In looking at the overall drug problem in our area, it is my opinion that law enforcement has certain obligations. I feel that our drug enforcement efforts need to concentrate on all levels of drug violations. We need to combat the curbside distribution in the high visibility areas and eliminate drug distributors from frequenting these areas to sell their illegal drugs.

Combined with the street emphasis, we also need to identify the street suppliers who arrange for the delivery of the illegal drugs to the street distributors. We must root out these individuals and eliminate the supply.

In addition to the overall street emphasis, our efforts should also be directed at medium to major level violators who arrange, finance, and supply large quantities of illegal drugs to saturate our area. Efforts should be made to provide the necessary resources that address these violators and to identify means to infiltrate and annihilate these organizations.

Drug enforcement efforts can only be successful if law enforcement recognizes the need to address the overall problem and is provided with the necessary resources to carry out these objectives. South Carolina is certainly not immune from the growing crisis of drug abuse. No locality within the country is an exception to this rule.

Law enforcement must work together to exchange information and resources, and it must recognize the need to involve the community in combating the problem. We must help change attitudes. Through our efforts in drug enforcement, we must show the people in our community that we as a whole need to work together to rid this awful disease from our area. By becoming involved, every man, woman, and child can make a difference.

I want to say, basically, in response to the Greenville Boys that were talked about yesterday, we did have a problem and still have a problem with big-time drug business in Greenville. In the late sixties and early seventies, drug enforcement was not the priority of law enforcement in this area and in the State, so we had some people who got a hold. They made a lot of money; they had a lot of people who sprang off from this one individual and became lieutenants in drug operations and also became the big, top people. It was like a hub, and these were spokes.

We still have those spokes here in the city of Greenville. As Solicitor Watson said, at one time we had 3 of the top 10 heroin dealers in the United States from the Greenville area. And that's why it happened. We can't let these people get hold again. We've got to stay on top of them, keep them on the move. And that's what we have to do.

Manpower is essential. We have pulled all we can pull from our uniformed patrol divisions, and the sheriff has, to combat the drug problem. You still have to provide basic law enforcement services. You still have to answer the calls. You still have to patrol the domestic violence problems that you have in this country. You can't put everything you have into drug enforcement; so, therefore, manpower is what we need. I'm not talking about one officer. I'm talking about five or six or seven or eight that would make up a team of drug enforcement people.

Several other things that I would like to mention that we are doing, and I think is the key to solving one of our problems in this country, is drug education, as the sheriff said. We are involved also in the DARE Program that deals with kids in the fifth grade. Now, what we're seeing right now is not going to be an immediate-type cure, but on down the road when you get people and children talking about they don't want to do drugs; they're not going to be involved in drugs, we're going to see that on down the road. But every department, every sheriff's department, every Federal agent, every State—everybody has got to be involved in the program. It has got to be a coordinated effort. We had a situation the other day where we had the highway patrol; they have a DARE Program that I didn't know about until it had been going on for some time. We all need to get together, get all of our efforts together and say, "Let's target these schools in this area," so every school can be a part of the program.

Prison overcrowding. I went to a meeting about 1 year ago that addressed prison overcrowding. It was the first time in my 22 years of law enforcement that I ever attended a meeting to try to figure out how to get people out of jail, and it was a strange meeting and something that kind of went against all that I've thought of in law enforcement.

All I can say is I do appreciate your coming here to listen to us. I don't know of anything else to be said. I'd hate to be Chief Bain, the last one sitting there, when all this other has been talked about; but I appreciate the opportunity.

PREPARED STATEMENT

Senator HOLLINGS. He's got something to say. I've seen his statement, too. We will place your statement in the record at this point.

[The statement follows:]

STATEMENT OF DAVID M. BRIDGES

DRUG IMPACT ON GREENVILLE

The growing drug abuse epidemic in the United States has certainly had an impact on South Carolina and more specifically the Greenville area. It is very clear that no area in the United States is immune from this growing problem. It is also clear that no one ethnic group, profession, economic group or graphic area is solely affected. No one can isolate themselves from the growing drug crisis.

Since 1984, drug traffic has been on an incline in the Greenville area. Cocaine abuse, by any method, especially the potent form of "crack" has steadily increased. From the year 1984 through 1988, the volume of drug cases has increased substantially primarily due to the introduction of "crack" to the Greenville area in late 1987.

GREENVILLE POLICE RESPONSE

In realizing the need to respond to this growing drug problem, the Greenville Police Department has for the last year and a half concentrated in the high visibility drug traffic areas. These areas, primarily lower income, have a large amount of curb-side drug sales of "crack" cocaine. We have approached this problem by addressing the drug demand.

This is accomplished by carrying out "Reverse Sting" operations which identify the buyers of these illicit drugs. We place undercover police officers on the street corners in these high visibility areas where curb-side sales are taking place. As buyers approach the undercover officers and solicit for a sale of a controlled substance, they are placed under arrest by backup officers and subsequently charged with attempting to possess the substance they inquired about. Frequently, the buyers will carry out the purchase and take possession of a fake substance that the officers had which resembles the actual drug.

As a result of this enforcement technique, over 450 individuals have been arrested for attempting to possess illegal drugs in the last year and a half. Of these 450, only six people have been repeat offenders.

Combined with the effort of addressing the drug demand, the Greenville Police Department has targeted street distributors and suppliers who frequent these high visibility drug traffic areas to peddle their goods. Through covert undercover operations that have run for periods of two to six months, we have attempted to eliminate the distribution and supply of street level drugs to specific areas within our community.

STRATEGIC GOALS AND OBJECTIVES

In looking at the overall drug problem in our area, it is my opinion that law enforcement has certain obligations. I feel our drug enforcement efforts need to concentrate on all levels of drug violations. We need to combat the curb-side distribution in the high visibility areas and eliminate street distributors from frequenting these areas to sell their illegal drugs.

Combined with this street emphasis, we also need to identify the street suppliers who arrange for the delivery of the illegal drugs to the street distributors. We must root out these individuals and eliminate the supply.

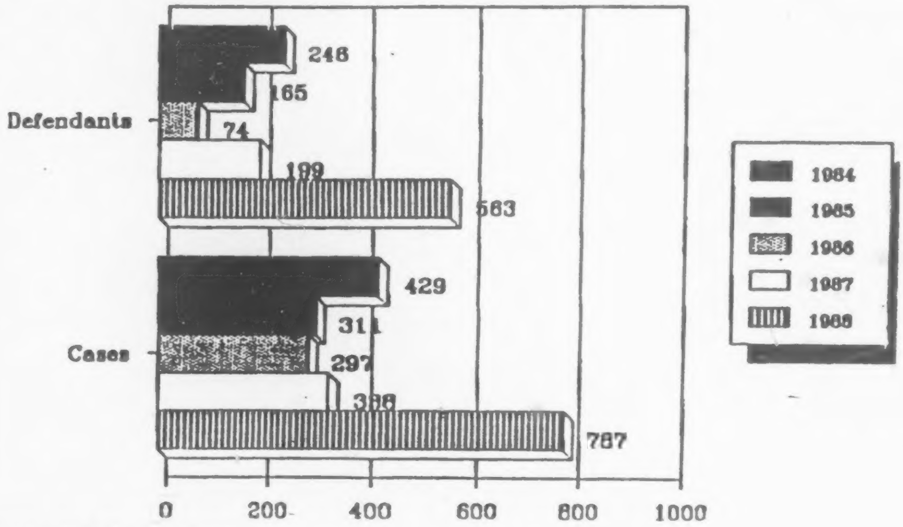
In addition to the overall street emphasis, our efforts should also be directed at the medium to major level violators who arrange, finance and supply large quantities of illegal drugs to saturate our area. Efforts should be made to provide the necessary resources that address these violators and to identify means to infiltrate and annihilate these organizations.

SUMMARY

Drug enforcement efforts can only be successful if law enforcement recognizes the need to address the overall problem and is provided with the necessary resources to carry out these objectives. South Carolina is certainly not immune from the growing crisis of drug abuse. No locality within the country is an exception to this rule.

Law enforcement must work together to exchange information and resources and it must recognize the need to involve the citizenry in combating the problem. We must help change attitudes. Through our efforts in drug enforcement, we must show the people of our community that we as a whole need to work together to rid this awful disease from our area. By becoming involved, every man, woman and child can make a difference.

Cases and Violators
January 1984 thru December 1988



Narcotics Intelligence Division

STATEMENT OF CHIEF W.C. BAIN, JR., DIRECTOR OF PUBLIC SAFETY, CITY OF SPARTANBURG, SC

Senator HOLLINGS. Chief Bain, we're glad to have you here, sir.

Mr. BAIN. Thank you very much. Senator, I can assure you I have gone through an education process, and I found a long time ago that anything that is reiterated is worth listening to. I think you're going to hear a little more reiteration, but I'm going to touch on some areas that haven't been touched on.

First of all, I'd like to personally thank you and our Congresswoman for what you are doing as individuals, and your efforts in assisting our people, our citizens, because that's what we're all here about. It's not for law enforcement. It's not for the Senate or the Congress. It's not for the solicitors. It's for our citizens, by whom we are all elected and appointed to serve.

I think without people like you who are dedicated to the cause of assisting our citizens, our country is not going to be worth a whole lot. The problem I see, the main problem we have in our country today, is that we have elected and appointed officials that absolutely care nothing about our citizens. They are not in touch with our citizens. They know absolutely nothing of what is going on, what misery they are suffering, what their problems are; and I applaud and commend you. I know both of you personally. I have dealt with you; I've talked to you, not just today. This is not just a show with you. This is from the heart, and this is trying to get something done for our citizens. So I commend you and I thank you and I applaud you for that, speaking on behalf of my citizens, who all belong to me, and I have to protect.

There are several things. You have my written statement. I think it says a good bit. You have heard from four people; this is the fifth person. I'm going to try to address some things where I won't be talking over and over the same thing.

I think the main thing we have to understand and realize is that law enforcement, throughout its history, has been a reactive organization. We get a call, we get a problem, we react to it. Those days are gone. We can no longer be a reactionary organization. We have to be proactive in our thinking. We have to look 1 year, 2, 3 years down ahead, get in front of the problems. As has been said, we have been playing catchup for a long time, and we have lost the battle.

Senator, we have lost the streets in our community. The dope pushers have taken over the streets. They have made our citizens the people who are in jails. Their jails are their homes, their apartments, and the complexes. They are afraid to sit on their porches. They are afraid to go to the store. They are afraid for their children to be playing in their own front yards. These are prisoners of war. We have our own prisoners, our own war; and we are the war. I don't care what anybody says, we are fighting a war, and we have lost it pitifully so far.

I feel like we are gaining some ground, and one of the things that you have been instrumental in, and through our Governor, we have a grant in Spartanburg County administered through our department. I think what we've got to look at is not trying to do more with more, but trying to do more with less, or trying to make what we get count and mean so much more for our people again.

We have a grant that you have given to us. Instead of it coming to the Spartanburg City Police Department, it comes to Spartanburg County. It's an intelligence-gathering unit. You have supplied us with manpower; you supplied us with a computer; you supplied us with equipment. What we're doing with this is we're gathering intelligence in the whole county of Spartanburg that will serve all of our citizens; plus we're in cooperation with Greenville, with Cherokee, with Anderson, with the State and the Federal people. Everybody is cooperating and has input in this, so everybody is sharing the knowledge. It's not just "We've got something. We're addressing our problem on our city streets." We're addressing everybody's problem, and everybody is assisting us to address the problem.

In your opening remark you mentioned the interstate. Our community is wide open now. We're not a sleepy little community that's got our own problems. I've been in law enforcement 30 years. I have never in my lifetime seen the problems that our community is facing today with drugs. It has devastated our community.

We have put on 14 additional officers during the past year—our city council, our citizens, our taxpayers—to fight nothing but the drug problem. If we could make an impact on the drug problem, we could eliminate 25 officers, not put on more officers. We could turn around and get back to doing the business that we're supposed to be doing, protecting our citizens, without the problem of drugs.

I think that this type grant, this type cooperation, is what we need to be looking at. As far as getting, as the little boy said, "more bang for our bucks," we need cooperation from the Federal Government. What I mean by that is we've got Federal agents that, by whatever means, reason, laws, procedure, or whatever, cannot share information with us. We've got DEA that we are keeping in business, giving them information on different drug pushers; and they, in turn, cannot share one ounce of information with us. Nothing.

Now, that is frustrating, when we give them information on a case and they get information back on a local level; if they could assist us, we could go out and stop our problem. Our problem is not with a ton; our problem is with 2 pounds or 1 pound or 1 ounce or whatever, that is coming in, as you have heard here, that is devastating our citizens. It's not what is being dropped off in Miami, it's what's being dropped off in Spartanburg in the streets that are killing our citizens and are maiming our youth, that are killing our economy, and so forth and so on. We need cooperation. We need information.

I feel like we need more cooperation and input from the military. I think that's worth repeating. When you've got the military that is trained, has all the assets, all the equipment, everything at their fingertips, and they cannot get involved in a war that has cost us more than the first, second, Korea, Vietnam, something is wrong.

When you've got people that are killing your citizens without regard for anybody, that's a war. We don't need a line drawn, and say, "You can't cross this parallel." We need the lines erased, and saying, "Everybody is going to work together, through the Federal, State, county, and local; and we're going to win this war for our citizens." Because they are the victims. They are losing.

I think that when you get to the point where you have lost the streets, as I've had to admit to you—and I think the sheriff and the chief will probably admit that in some of the areas in Greenville they've lost the streets. It's been taken over by these drug pushers. We're in a war. They are armed with automatic weapons. They're using them.

I don't care anything about statistics, but in my report I think it's worth sharing. In 1987 we had seven homicides in Spartanburg. In 1988 we had seven homicides; two of them were justifiable homicides, so that means we had five murders. In 1989 we had 14 homicides; and out of this 14, 11 of them were drug related.

Now, that's frightening because these drug pushers are at each other, over turf, over territory. Those bullets don't have eyes. They have no regard, whether it's a child playing in their yard, because it's getting right back to the complexes where the biggest majority of the people live. This is where the war is being fought. It's not in your influential areas; it's in the streets and the trenches where our lower socioeconomic people are living, and they are the victims. They are not the problem, they are the victims.

Crack cocaine, that's the problem. We can talk about everything else. Cases: We made zero cases of heroin in 1987, five in 1988, and nine cases of heroin in 1989. Nine cases is nothing. What did we do with crack cocaine? We had 58 in 1987, 209 in 1988, and 378 cases in 1989. That's a 44-percent increase from 1988 to 1989, and from

1987 to 1989 a 119-percent increase in crack cocaine. That's the problem in our community now.

Let me go a step further. What we've got coming to our community in the next short while, because it's around us and we're always kind of on the tail end from New York, Chicago, Miami, whatever. But we've got ice coming. We'd better be proactive because crack cocaine gives a 10 to 15 minute high, and it's a right expensive drug. It's got to come in from somewhere else. Ice is a methamphetamine that can be made in your back room. It gives you a high from 12 to 14 hours. It's a hallucinogenic drug. You're not dealing with somebody that's just high; you're dealing with somebody that's going to be tripping off a building, or they're walking into your place of business or your home and killing you or robbing you, or whatever.

We've got people kicking our doors in of our homes, with people sitting in there. We've never had this before in our history. We've never had people going and kicking in doors of our homes where the people were at home. They used to wait until the people go to work, break in, get their VCR, their TV, and go sell it. They don't care whether people are at home or not. They're going in, and we're going to have more murders. We've already had murders in our community of innocent people, their doors being kicked in, them being blown away in their own home. That's the problem. We've got to address those problems for our people.

I think prevention is the main thing we need to talk about because prevention, you've got no losers. There's no victims, there's no people in jail, there's no people to prosecute. We've got to shift our emphasis on prevention, whatever it takes, whatever we need to do.

I think that the biggest thing that I have seen that has affected our department was the LEAA funds were cut out. You were responsible for taking a look at this, and I appreciate that because I don't mind telling you, what these funds were being used for was ridiculous. We don't need equipment like tanks or this kind of stuff in local law enforcement. It was ridiculous what some of these funds—it makes you sick what some of them were thrown away on.

But one thing that was kind of thrown out with the bathwater was the funds for education. I feel like that was a real mistake, cutting the grants for our police officers to get educated. A professional police officer is going to do a whole lot better job. We are really contending with people who are very smart, very intelligent. They have everything at their fingertips. We're hiring high school educated people, and they're not able to go out and do as professional a job, maybe, as they should. I think we need to get back some criminal justice funds to educate our officers at a higher level, where they can go out and do a more professional job for our citizens.

The last thing I want to touch on, I think that we're setting a good example right here. We have the same example in Spartanburg, and you've got the same example everywhere in the world. You've got people begging for courtrooms. How many times does the county council meet in this room? How many times does the city council meet in our council chambers? How many times does a school board meet in a room? We've got things at our fingertips.

We need to be, again, proactive; start looking at utilizing our assets better. Let's don't spend more money to build courthouses. Let's hire additional prosecutors; let's hire additional people; let's put the money in something that we need, whether it be additional jails, or whatever. But let's utilize what we've got.

We don't need maximum security prisons to take care of somebody using a credit card. We can go in and buy some very inexpensive property. If a person can be let out all week and has to make a weekend in jail, why can't he make a weekend in some house that's built for $10 a square foot instead of $100 a square foot? I mean, I think we need to start using our head and start spending our taxpayers' money a whole lot wiser, and utilizing what we've got.

What's wrong with this being a courtroom? You need a judge, a prosecutor; set up a jury. Or take this and take your guilty pleas. You don't even need a jury. Instead of wasting a courtroom, use this to take your guilty pleas. This can be operated—say, you can knock off every once or twice a month. You can operate a whole lot of court right here or in the city council chambers, or in the city courtroom. We have court four times a week, 2:30 in the evening, from 9 or 10 in the morning.

Do you see what I'm trying to say? We've got so many assets at our fingertips that we're not using. We're not looking at them. We're just talking about spending money. Spending money is not going to solve the problem. We've spent money, and we've failed. I think it's time we need to start being better stewards of our taxpayers' money and their health and welfare and safety, and we're all going to win. And I'm through preaching. Thank you.

PREPARED STATEMENT

Senator HOLLINGS. Thank you. We will insert your statement in the record at this point.

[The statement follows:]

STATEMENT OF W.C. BAIN, JR.

The Spartanburg Public Safety Department has experienced some tragic and frustrating ordeals in the 1980's. I feel the changes and adjustments that law enforcement has had to make in the 1980's has been one of the most traumatic and devastating periods that law enforcement and our society has experienced throughout the history of our society.

I do not remember anytime in our history that human beings have made such a drastic change in their feelings and their dealings with their fellow man. I feel that the unlawful drug sellers and users have displayed a total disregard for their fellow citizens, and society has suffered the most dramatic and traumatic time from the individuals connected with the drug culture.

We have experienced the biggest increase in serious crime that has every been recorded, and this can be directly attributed to drugs. This would cover the spectrum from alcohol to crack cocaine. Since drugs were first introduced into our society, we have experienced a rise in our crime rate from the use of drugs, especially drugs like heroin and cocaine.

However, there has never been an increase like what happened since crack cocaine has been introduced into our society. (Three year comparison enclosed.) We have gone from problems with shoplifting, store breaking and home burglaries to an increase in murders, armed robberies and home burglaries where the people are at home and with utter disregard for our citizens, doors have been kicked and our citizens physically and mentally abused. It has caused our department to put on special teams of officers and our city to hire additional officers for the sole purpose of trying to make an impact on the drug problem.

We have seen the streets of Spartanburg go from places of enjoyment and safety to where they have been taken over by armed and dangerous gunmen involved in the business of illegal drugs.

We have seen a turnaround during 1989, and I truly believe the 1990's can see our community turning around but only if the right things occur. As stated earlier, we have made a sizable impact on this problem with out special teams. These have been made possible by a joint cooperation and funding from different agencies and levels of government. This type of cooperation and joint ventures is a good start and a foundation to build on, but we must realize that this is only a start and to win this war against drug gangs and local organized crime, we, too, must be totally involved and organized as a community.

In my professional opinion, this can be accomplished if we continue our efforts through enforcement, educate our citizens in the problems with drugs and get a commitment and a much higher level of involvement from all of our citizens and all areas of our community and all walks of life. We must, however, include the education to reach the young people before they get involved with drugs and educate them to the dangers and pitfalls that drug use causes.

Our "Just Say No" groups, using positive peer pressure, with the young people actually being involved, is one of the major ways to accomplish this. The positive peer pressure is so very important. We also must not lose sight from a treatment standpoint because the individuals are not only physically addicted, but psychologically addicted, which in most cases is the hardest to deal with and correct.

We must also realize that through enforcement comes a larger population in our prisons, which we must be willing to support if we want safety from these criminals. The most important aspect and means by which we, as a community, can deal with this terrible problem is through prevention. I can assure you the problem will not lessen on its own, and it is not something that we can turn our backs on and make it go away. The reason being, as I have related, the major problem has come from crack cocaine.

There is on the horizon, and I assure you coming to our community, "ice" which is a stronger, more lethal and a longer high than crack. This can mean only one thing: a higher level of misery and danger for everyone involved. This makes prevention the most viable solution; as with prevention, there are no victims, there is no enforcement, there is no incarceration, there is no rehabilitation, there is very little monetary cost, but there is a huge commitment from every agency involved in the Criminal Justice system and every citizen who wants a better and safer place to live and raise their families. There is no doubt that if we, as a community, stand together, not with lip service, but a commitment to see our community grow, prosper and be a better and safer place for our citizens, and more especially, for our young people, then we can accomplish this and let the 1990's go down in history as being a more positive, safe time for our community.

I can, however, assure you that if this commitment is not made, the 1990's will overshadow the 1980's as the darkest time and the most violent time in our history. We must be willing to commit to winning and enjoying a high level of personal safety. As we know, winning beats losing every time.

CITY DRUG CASES

	1987	1988	1989
Heroin	0	5	9
Cocaine	58	209	378
Marijuana	238	262	235
Schedule 2	4	1	5
Schedule 3	1	2	2
Schedule 4	9	2	9
LSD/other synthetics	1	0	0
Miscellaneous drugs	1	12	11
Drugs sold one-half mile from school	8	9	54
Total	320	520	703

Total cases by department.—1987—17,631: 7,141 criminal and 10,490 traffic; 1988—18,227: 7,424 criminal and 10,803 traffic; and 1989—18,222: 8,150 criminal and 10,072 traffic.

Stolen property.—1987—$1,607,669; 1988—$1,885,163; and 1989—$2,787,482.

Recovered property.—1987—$691,817; 1988—$844,319; and 1989—$1,281,488.

1989 compared to 1988—40 percent overall increase.

1989 compared to 1987—119 percent overall increase.

1987.—7 homicides, 6 solved, 1 not solved, 2 drug related 3 on northside of city, 4 on southside of city; 44 rapes; 6 attempted rapes; 92 robberies; 1,434 assaults; 868 house breakings; 331 store breakings; and 203 auto thefts.

1988.—7 homicides, 7 solved, 2 drug related, 4 on northside of city, 4 on southside of city, 2 justifiable homicides; 40 rapes; 14 attempted rapes; 240 robberies; 2,009 assaults; 1,081 house breakings; 333 store breakings; and 286 auto thefts.

1989.—14 homicides, 10 solved, 4 unsolved, 11 drug related, 6 on northside of city, 8 on southside of city; 44 rapes; 11 attempted rapes; 257 robberies; 2,257 assaults; 942 house breakings; 465 store breakings; and 350 auto thefts.

Senator HOLLINGS. Well, this has been the best I've heard, not just from what you've stated, but the feeling of concern is obvious in your presentation here; and I wish everybody in the Senate and Congress could hear it.

Ms. PATTERSON. I could have told you that we'd hear the best in this area.

Senator HOLLINGS. Let's talk about where I started, with the solicitors. In the old days the solicitor would go to Columbia to help us draft the bills. This was 40 years ago when I was in the legislature, and Gedney Howe was my solicitor. We roomed together, and for him to go up on Tuesday, I would help him. When the criminal session came in general sessions, I would help him empty the jails on Monday and take the pleas. So I can see what you're saying. You're right, I could put a jury right over there now to hear these cases.

Then, of course, law enforcement more or less saved me in the 4 years when we had all the protests. I got Jackie Robinson through the Greenville airport, and everything else of that kind, and we never had anyone seriously hurt. We didn't lose a single life.

And the only reference to crack and cocaine was in "Porgy and Bess," with Porgy on coke. I can hear him singing that song now, down by the waterfront, you see, the international part that you emphasized, Sheriff Brown. They'd bring it into the port, and only the stevedores working down on the dock ever heard of coke back then. It wasn't a menace. We never heard of it or saw it.

In my days as the chief law enforcement officer of the State, drug cases—we never even thought of them. Now, we listen to you folks, and we learn we're losing our communities. We're losing our citizenry, and we're losing the war. We're behind the curve on our fight against illegal drugs.

The situation has gotten way worse than I've ever heard of. Chief Bain, as you emphasized, everybody cooperating, at every particular level, is the only way we're going to prevail.

Now, let's try that on for size. If I have got so many dollars, then where do I put them? Do I start building courtrooms, do I start hiring prosecutors from the Washington area, do I start giving education from the Washington area? Where do we respect the proposition that the police powers are the responsibility and function of our several States, on the one hand, and yet that drugs are everybody's problem on the other hand? How do we coordinate it?

Let me put in the record at this particular point, a chart which illustrates how we've stepped up funding for the war on drugs, and yet we're still behind.

[The information follows:]

SELECTED DEPARTMENT OF JUSTICE AGENCIES

[Dollars in millions]

	Fiscal year—						
	1989 enacted	1990 enacted			1991 request		
		Amount	Change	Percent	Amount	Change	Percent
DEA	534	[1] 617	+83	15	[1] 791	+174	28
FBI	1,439	1,551	+112	7	[1] 1,729	+178	14
INS	822	[1] 850	+28	3	[1] 894	+44	5
U.S. marshals	205	[1] 239	+34	17	[1] 290	+51	21
U.S. attorneys	460	[1] 564	+104	23	[1] 694	+130	23
Prison:							
Construction	580	1,397	+817	140	374	1,023	−73
Salaries and expenses	952	1,139	+187	20	1,372	+233	20
Drug grants	150	445	+295	200	490	+45	10
Total justice	6,690	8,606	+1,916	29	8,971	+365	4

[1] OCDE dollars included

ADDITIONAL LAW ENFORCEMENT PERSONNEL IN SOUTH CAROLINA

Senator HOLLINGS. Within the increase for U.S. attorneys, we're supposed to get 18 more in South Carolina. Last year they only gave us four new positions because we had a poor record in fighting drugs a few years ago. The FBI didn't have a single case in Beaufort, Horry, or Charleston Counties; and during the year hardly a DEA charge was made down there. I don't know what happened down there; they went to sleep, or something else of that kind. But we mandated in the bill now that they increase DEA staff in Charleston, and we've talked with the Attorney General and to Judge Sessions, and we're getting more FBI agents in along with these additional U.S. attorney positions.

In Federal prison construction we're building over 33,000 beds right now. We turned Olympic facilities—like at Lake Placid, into Federal correctional facilities. I got the athletes out 1 week, and I started putting bars in the windows the next week; and I've got it filled right this minute with Federal prisoners. We're taking many closed military bases and turning them into Federal prison camps. Any kind of facility we can get our hands on we're using to house minimal offenders and others.

BEST USE OF NEW MONEYS

For State and local drug grants—we got $1.7 million in South Carolina last year and $5.4 million this year; and without even asking the question whether you've got any of that money or not, Solicitor Watson, from your vantage point, if I have so much money, should I start building courtrooms at the Federal level or hiring my prosecutors at the Federal level, or should I get more education, as Chief Bain says, or should I get more DEA agents?

The local sheriffs tell me that in a rural county everybody knows everybody, and I can tell, from the enforcement standpoint, it's difficult to operate stings undercover when a newcomer is easily identified. How do you go undercover in Jasper County, or even Orangeburg? Yesterday, the sheriff from Orangeburg was telling us of his problem in this regard. So, limited as they are, couldn't I help with far more DEA agents, with their expertise and surveillance vehicles, working in South Carolina in cooperation with the State and local police. That's how we got the bust down there in Orangeburg and in several other places around the State. Can we fight drugs better with more sophisticated equipment? Can we fight drugs better with more DEA agents? Can we, as Chief Bain says, set up all local law enforcement—like I've got the FBI school at Quantico; can we set up those kind of schools to help with prosecutors, to help with law enforcement officers? What do you think?

Mr. WATSON. I don't necessarily think there's a need for education for prosecutors. I think there are enough resources there with the National College of District Attorneys and our own solicitors having meetings and seminars.

Senator HOLLINGS. How are you going to retain them? As Solicitor Ducworth says, they all just come in like we used to: Get in, get the experience, and go out and make a living. You know what I mean?

Mr. WATSON. Sure. The attorneys I look for are those who come in, that want to learn how to prosecute cases and want to market themselves to the private sector where they can make more money, and I live with that reality. I do think that my office is at the stage where we need some higher deputy salaries to keep some professionalism at the top level. But again, that answer doesn't come from Washington.

I'd be curious to see the cost of a conviction in Federal court, as opposed to the cost in State courts. The reason I say that, I don't think there's anybody here that would disagree with the fact that I think that perhaps our local law enforcement is more efficient at catching these drug dealers and putting them behind bars than perhaps the Federal level.

To answer your question, I would say, probably, more DEA agents. More agents, because what I think—if we're talking about everybody, we had a meeting, the chief and the sheriff and I, recently. What we'd like to do is maybe not form so many task forces, but let us work cases and then call in the Federal prosecutors when we've got a good case put together, and maybe we think we need a wiretap—because we don't have wiretaps at the State level—is to bring the DEA in, bring the Federal prosecutor in, and then to let them be part of this prosecution or the end of the investigation.

We've started recently—we had a meeting this week with the assistant U.S. attorney here, where we had a tremendous drug operation conducted by the sheriff's office that led to numerous arrests. We put our heads together and decided that probably the best forum is Federal court; and so we're going to take what was solely a State investigation or a county investigation, but we're going to take it to the Federal courts.

But I would say we need more equipment and training for officers. I would say manpower, because we need the eyes and the ears out there with the DEA agents. But I still would say, as much grant money as is available for prosecutors and for local law enforcement, because I think that the drug battle is more efficiently fought at the local level.

USE OF DRUG GRANT FUNDS

Senator HOLLINGS. Did you get any of the grant money in your circuit?

Mr. WATSON. I get some. Yes, sir; we get some from—I don't know if I've got a specific drug grant right now, but I've got a victim grant that comes from the Federal Government through the State; and also a career criminal prosecutor, which has been a very efficient grant, where we try to target career criminals, very violent offenders. And it basically puts those cases on the fast track.

Senator HOLLINGS. Did any of you get any grant money last year through that Federal drug grant program?

Mr. BAIN. Yes, sir.

Mr. BROWN. Yes, sir.

Senator HOLLINGS. You did here in Spartanburg, and the sheriff in Greenville. Well, the question is, where would you put the money? We have a shortage of prosecutors, courtrooms, education, and DEA agents. Mr. Ducworth, where would you put the funds?

Mr. DUCWORTH. Well, Senator, I somewhat disagree with Joe about the need for education for assistant solicitors. We have kind of a different situation from Joe. He's got a much bigger office. I think he gets pretty good funding from his counties. In our situation, we're sort of a medium-sized circuit, and we don't have quite the funding that we need, and we don't have the number of prosecutors that we can do without for 1 week here and there to go off to school at the National College of District Attorneys. I think it would help us significantly if we had some nearby schools within the State, on the weekends or something like this, where they wouldn't have to be away from work that much. I think that would help us significantly.

Basically, like Joe said, if we could get enough funding to pay deputy solicitors more money, to keep them on longer and have a few career prosecutors within each solicitor's office. I know you can't expect every one of them to stay in the solicitor's office for 20 years. That's unreasonable. But we do need to be able to give some sufficient funding to keep one or two there on a pretty much permanent basis.

I think grants for law enforcement on a local level would be very helpful. There seems to be a gap, to me, between the cases that the Federal people will work and the cases that the State people can work; and if they could have more cooperation between the State and the Federal agents—I know the cooperation is much better now than it has been in the past, but——

FEDERAL/STATE COOPERATION

Senator HOLLINGS. Where is that gap, as you see it? That's what we'd like to hear about.

Mr. DUCWORTH. All right, there is a—I don't know exactly what the limit is, but DEA will not work a case unless there is so much involved, as I understand it. I'm sure probably the sheriff or the chiefs can address it better than I can. But then our people only have so much buy money, or whatever, so that they cannot go after big quantities of drugs by themselves. So the medium-sized dealers seem to fall within the crack, there. They're too small for the Federal people to go after, but they're too big for our local people to go after.

Senator HOLLINGS. Sheriff Brown, where would you put the money? And do you find a gap? Let the committee know about that, in-between the handling of these cases, where there is a line of demarcation, you might say, between the State prosecution and what the Feds will handle, or where Federal agents cut off or will not involve themselves?

Mr. BROWN. I think there has been in the past, Senator, a reluctance from Federal agencies to get involved in local investigations unless there was a way to get a large quantity or a big organization of people involved.

I told the solicitor the other day, after we met with Assistant U.S. Attorney Stephens, I think our new philosophy will be, "If the Federal Government can't guard our borders, let them guard our prisoners." And we will just turn our State prisoners over to the Federal Government, because it's just simple. Eighty percent of my crime in this community is drug related. My jail is overcrowded. The court docket is overcrowded. The prison system in the State is overcrowded. I don't know what we're going to do with these people.

And we are getting better at investigating drug cases. We are working closer together with other agencies; we are making arrests. I don't know where we're going to put them. The jails are full with drug people now; our prisons are full. The demand from the public on local law enforcement is just unreal in this day, and I don't know the best place to put the money.

EDUCATION

I do know this: That the DARE programs, the drug abuse resistance education program, in my 24 years, is the finest program I have seen. We are starting at kindergarten, with a little bit of the DARE Program each year, from kindergarten, first, second, and working our way to fifth grade. We start our entire program in the fifth grade, and it was a tremendous sight to see at our local graduation of the DARE students in the fifth grade of seven local schools, where the fifth——

Senator HOLLINGS. You've got double-DARE; it comes right on up the line.

Mr. BROWN. I mean, we could double-DARE officers. I have one, and I need six. I have a grant proposal in right now to the State, through the money that you were so gracious to give this State, for four more DARE officers. Now the county/local government is trying to get me to use seized funds to match matching funds for these grants, which I think is totally against the grain of what the law is intended for. But I think education and prevention is the key area, as Chief Bain said. We've got to start putting more emphasis on education and prevention.

I go back to, again, I was as frank as I knew how to be, because I knew I learned well from you. You are very frank in your comments, and I thought I could be frank with you. We will never, ever stop the drug problem in this country until we stop the importation of drugs at our borders. That's where the emphasis has got to be.

DRUG IMPORTATION

Senator HOLLINGS. Before I ask the others about the money, now, on that importation, Sheriff Brown—and I'm glad you gave the Feds and us at the Washington level a hotfoot in your testimony. I had the same frustration about paring off other programs: Don't cut my particular program in order to get the money for the drug program. And, in fact, that was the solution that we got endorsed by President Bush last year when I said, "Cut everybody's program, right straight across the board, in order to increase the funds for the war on drugs." That was endorsed by President Bush, and that's how we finally got this far with these increases. And yet we're not nearly scratching the surface, as I can learn from listening to you folks.

But cutting off that spigot, I go right on down the line. I remember way out in the Golden Triangle, in upper Thailand, Laos, and Burma; coming down into the fields of Turkey, we burned all the poppy fields; coming down into the factories and laboratories of Marseilles, France, we broke all of those up; went right down into Bolivia and Peru in the last 20 years.

Mr. BROWN. That's right.

Senator HOLLINGS. Now I'm in Colombia, and I'm absolutely confident that if we close down Colombia, if we got peace in our time and no more barons and no more drugs and nothing coming out of Colombia, we'd still have an abundance coming out of the Golden Triangle or from somewhere else, or from within. You know, when we had Prohibition, we had Berkeley County in this State, like you had the Greenville Boys. Well, Berkeley County made the moonshine and shipped it all the way to Chicago. We had a real industry going on down there in my backyard.

So when you find people testify and say, "Cut off that spigot." That plane that crashed at Kennedy last month, three of them—one died with all the cocaine in his intestines, and two others are waiting to recover in the hospital so they can be arrested because they had drug loads in their intestines. When the demand is making it pay to do that, you've got a demand problem, ultimately, that has to be solved. I don't know how you cut off the spigot with a 2,000-mile border. We've thought about a Maginot Line down there with Mexico and the United States; then you get to the Canadian border; then you get to the planes coming in; then you get to the searches of everybody coming through Customs, and everything else.

I agree with you, we ought to use the military more. Incidentally, the military wants to be used. I found that out with Hugo. I mean, they all are paid and drilled. Rather than run through the woods, they could help clear out the woods, and everything else of that kind. So the Marines came right down into Monck's Corner, McClellanville, and everywhere else—the Army came with a supply battalion right there at the Guignard Auditorium. We had

24 counties hit and to keep things going into Rock Hill, Sumter, and other parts, we used the military. And they did an outstanding job. Our National Guard did an outstanding job. And I think now, with the fall of the wall in Europe, the military can well be used and kept keen and alert by helping in this drug war. They have just sort of held themselves off, military people; but we need them, and we've got—it's that mammoth a problem, as Chief Bain was pointing out.

Mr. **Brown**. Well, I'm certainly not naive enough to believe if we stop the spigot of drugs in this country, it's going to cure our drug problem. But we talk about putting more money here, more money there, more enforcement, more DEA; and we've still got this inflow of drugs coming into this country, almost with impunity. It's coming in at will. I just think we've got to put more emphasis on our borders; if we will have any success at all, we've got to do that.

Senator **Hollings**. We're using surveillance planes, now, from the Air Force. We are looking in all the flower boxes coming out of Colombia. We're trying at every particular level, stepping it up, stepping it up, trying to get everybody working together. But when they fly in with stuff in their intestines, you can see that——

Mr. **Brown**. Nothing you can do about that.

Senator **Hollings** [continuing]. The demand and the education has got to be more emphasized. How about it, Chief Bridges, what do you think? Where would you put the money?

Mr. **Bridges**. Well basically, I agree, with the influx of drugs coming in, it's got to be a Federal problem. I'm not going to blame the Federal Government for every problem we've got in the city of Greenville.

I'll have to say that we cooperate and have a good working relationship with DEA. We have for years and years and years. We have had no problem with cooperation. We've worked with them today, as a matter of fact.

Senator **Hollings**. Where is the gap on the information, though?

Mr. **Bridges**. I don't have a gap.

Senator **Hollings**. You can get the information from them?

GREENVILLE

Mr. **Bridges**. Yes, sir; we've always had excellent cooperation from DEA. Another thing I want to say, basically, is that I know Chief Bain has had 1 year in Spartanburg that has really been devastating. He has had a number of homicides. But, in fact, in the city of Greenville, we had 6 last year; and I remember in 1971 we were the homicide capital of the United States, per capita; we had 29. Out of six homicides last year, three of them were drug related.

We have begun to take back our streets in the city of Greenville. I am more optimistic, I think, than some other people are. We've got a small city limit; we've got good manpower. We have instituted community-oriented policing, where we have a community patrol officer in these high drug areas; and we are beginning to see a difference. It appears that our crime rate in Greenville city will go down in 1989. It might skyrocket next year.

Crack cocaine is a terrible thing. It's the worst thing I've seen in 22 years. But I have to say, I do not want to blame the Federal

Government for everything. We've got a lot to do, ourselves, and we've got to have goals. We've got to work hard. We've got to have officers well trained. We've got to come up with new, innovative programs in order to fight the drug war.

Another thing, on equipment, as far as spending money, we, basically, have all the equipment we need. We get it through confiscated funds. If I had to name something we need right now, it's a new surveillance van. We've got an old one, but we need a newer one, which we're working on now, as far as rounding up the money in confiscated funds.

If I had to name anything in the city of Greenville that would make a dent on drug enforcement, give me the manpower. Have the grants going, to where I could get a dozen men and put them strictly on drug enforcement; and that, right there in itself, would make a difference in the city of Greenville. We're small enough to where I do believe that with our innovative programs, reverse stings, we can take back our streets; and our community patrol officers, I believe, can hold them.

We have really seen a difference in the city of Greenville on curbservice drugs and the visibility of drug trafficking. It shows when your burglaries are going down; your aggravated assaults, I know, are going down. I don't know what next year brings, but we hope that we can continue this trend. But I don't want to blame everything on the Feds.

NO FEDERAL LEADER

Senator HOLLINGS. No; I don't mind. I see it at that particular level. We have a czar. I have great respect for Mr. Bennett. He's very articulate and very knowledgeable, but he's really not on top of the drug crisis. There's no one person in control right now of the Federal drug programs.

I mentioned the Golden Triangle. If I could put a Coast Guard officer in the Port of Bangkok and leave him there for 1 year, I can tell you from working in ports myself, that particular individual would know every ship coming in, every ship leaving, every stevedore, every one of the shippers, everybody that's working, and have a total familiarity. All he would have to do is just tip us off when the ship was coming.

Now, at this minute I can tell you where every Russian vessel is, period. You are spending billions of dollars for that information. Why not spend some of that money to know where every drug vessel is coming in, track it all the way down, and stop it, like you said, and inspect it, like Sheriff Brown is telling us. We're not doing it because the State Department says that if I put one more individual in the Embassy at Bangkok, it's just too large now, and he can't afford to have one in the State Department. Yet the Coast Guard is doing an outstanding job; yet the DEA is working; yet Customs is working, and everything else of that kind. But you still have these crosscurrents where no one really is in charge at the Federal level.

They're not getting the attention. We're knocking at the door because you folks are coming in loud and clear to us at the Washington level that this is a real war now, and the national defense role we will assume. Like it or not, this is a real enemy, this drug thing.

Chief Bain, once again, do you want to elaborate on that answer about where to put the money?

Mr. Bain. Well, I think we've addressed that.

Senator Hollings. Yes, sir.

Mr. Bain. And, again, I think that we need to be thinking more about prevention because I think that's the key tool. I think we're really talking about a short range, and then a long range. I think we all agree that we have lost handle.

I agree with Chief Bridges. We, of Spartanburg, have taken back our streets in most areas. We have had to do that by our citizens putting on 14 additional officers. I can assure him that if he can get 12 additional officers and put them on drugs, he is going to make an impact. Anybody could make an impact with that many officers.

But, again, we've got to consider the other side of the source because what we're arresting, the cases we make, if we're going to a solicitor and they're talking about 10 months, 12 months of backlog, something is wrong. Because I can assure you these people don't have trouble making bond. They've got all the money at their fingertips. You put them back on the street, they're going to go right back into business. We've had them released from jail, and in 5 minutes they're right back on the same street corner, doing the same thing.

Again, I think we're going to have to put some money, short range, in prosecution, in prisons, until we hit a balancing point. In law enforcement we're going to have to address it, to go out and try to eliminate the problem. Now, through attrition we can reduce the number of solicitors, the number of law enforcement; we can change some of these facilities into something else 5 or 10 years down the road, after we take back our streets, or communities, and address the problem.

But we've got a short-range goal, that we've got to go out and defeat the drug problem, whatever it takes. But, again, I think we need to not lose sight of let's utilize what we've already got instead of just spending more money. We've got to spend money to do it, but we need to spend that money wisely, not spending on building something we've already got that we can use. Let's use it on manpower, on prisons, or utilize it, like you say, the facility that's there, for offenders that are not violent offenders.

I think we're going to have to address the problem from the standpoint—and here again we're talking about putting more people in jail or making them stay longer; but if you've got a person that's involved with drug trafficking, a person involved in drugs, that are using weapons, that are using violence to do crack, we're going to have to make it to where it's not profitable.

What we're doing, we've got a balance. And as long as it's profitable for me to do something, I'm going to do it. When it gets to where it's not profitable, I'm going to stop doing it. If I can make $5,000 or $10,000 a week standing on the street corner with no overhead, I'm going to do it. If I'm looking at 6 months' probation, that's a joke. If I'm looking at 1 year in jail, I can make 10 times more money in 1 year and take a chance of going to jail because I'm smart enough not to be caught.

If we make it where if a person is caught trafficking in drugs, selling drugs, using a weapon for commission of a violent crime, well, they're going to jail not for 24 months, but for the 25 years that they're sentenced, then we're going to make it where it's not worthwhile. A person is gambling with a long term. We've got to make it where it's not worth the people's while to commit these crimes.

And drugs, like I say, you're dealing with people that they're not thinking with a rational mind. We think we can rationalize with people. You can't rationalize with somebody that doesn't have a mind to start with; it's gone. They've sniffed it away or shot it away, or that sort of thing.

I think if we're just looking at short term, we're going to have to put on more law enforcement, more solicitors; and everybody is going to have to do—and again, I'm not being critical of the Federal Government; I'm not being critical of DEA. Please don't misunderstand what I'm saying. I'm being critical of the policy these people have to work under. The chief may be getting all the information he wants from DEA; I can assure you, we're not. They're telling us, we cannot give you this information. Something is wrong when law enforcement can't cooperate with each other.

Senator HOLLINGS. We've got to clear that up at our level, and we will; and we have to get more DEA personnel in here to help us get through that bureaucracy on the one hand, and the sentencing on the other hand.

FEDERAL BUREAUCRACY

Solicitor Ducworth, I am a lawyer. That's my profession, and yet I'm embarrassed about the bureaucracy of the legal profession, specifically. I have said long since, Noriega, for heaven's sake, turn him over to the Panamanians. If I convicted Noriega this morning, it's not with any credibility. It's the Yankee up north, the gringo up north; he's convicting a fellow, and he never had a fair chance in America. Whereas, he's committed murder down there of his own people, last October; and they want him, and they can hold him for several months, and they can develop a judicial system for a fair trial by the end of the year. It's going to be, with the bureaucracy, 2 years before we get him to trial in this country.

Do you know what's the matter with us lawyers? Why all that bureaucracy on the one hand, and then after the whole trial, the 25-year sentence, and you're out in 3 years? Tell me about it, either one of you. How can we correct this situation? We're passing a crime bill; I'm asking a real question. We're passing a crime bill in Washington, here, next week, we think, with respect to the habeas corpus, the exclusionary rule, and all of these other things. How can we clean this up—speed up trials and make the sentence stick?

LACK OF COURT TIME

Mr. DUCWORTH. Well, the big problem that we're facing right now in South Carolina is the lack of court time. That's why we're getting more and more of a backlog. And these cases, after they get so old, we have to do something with them. We have to move them somehow, and there's almost no way around plea bargaining. As you know as a lawyer, if you've got a defendant, you feel like the longer you can put it off, the better chance you've got of getting a lighter sentence on him. And then once you get to the prison system, they're just so overcrowded, they have to come up with programs to get them out of the system. I'm sure, as soon as they get somebody in the system, they start figuring, how soon can we turn this one over and get rid of him to make room for somebody else? And it's just a part of the process of playing catchup that we've been playing for so long. We need to get the sufficient personnel, the sufficient court time to deal with them, to deal with them quickly, and then have the space to keep them there once they send them to prison.

Senator HOLLINGS. I had an experience in Washington in the sixties, when I first got there, in the district. They broke into my apartment, and law enforcement said, "Well, don't worry about it, we know who it is." I said, "Well, let's go get them." They said, "No use to get them because if you get them they'll put up a bond, and break into someplace else and get a bond, and break into someplace else and get another bond; and then you get a five- or six-time offender, and the case doesn't come up for 2 years, and then you lose all the witnesses." So we had to change that in the district, and try to get an acceleration of the criminal justice system.

Solicitor Watson, what do you think about our legal bureaucracy? Wherein can we clean that up?

Mr. WATSON. Senator, there are basically two aspects to your question: The first one is sort of pretrial; and the other one is post-trial, letting them out too early.

Pretrial, I don't think we really have a bureaucracy at the State level, and I don't really see a bureaucracy in South Carolina at the Federal level, because it appears, just from reading the paper and what I know about cases, that once a case is made, it gets into the system in the Federal level.

The problem of getting cases to trial in the State level, again, is just the backlog. We just need to work on that backlog. And that's going to take, again, more courtrooms, more prosecutors, et cetera.

As far as letting these people out early, I know we can all sit here and tell horror stories; and I used to, in one of the speeches I gave to civic groups, I had an actual statistic. You used to be able, on a 10-year sentence, to get out on one of the work release programs in 2 months and 17 days, on a 10-year sentence. Now, a lot of things had to go right.

Historically, what we've done is we haven't looked at the front end of the system; we've looked at the back end of the system. We get crowded, so we develop programs to let people out: Work release, extended work release, furlough, early furlough; all these programs to let people out. When that doesn't work, we come up with the EPA, the Emergency Powers Act, where the Governor, to keep the Federal Government from coming in and taking over our prison system, simply lets people out, cuts time off. And, unfortunately, Dick Riley had to cut 6 months off, then 1 year off people's sentences to free up the prison system.

In 1985 South Carolina passed the ominous crime bill, which was one of Dick Riley's big efforts. And what he said was, we're looking at the back end of the system. This is wrong. Let's look at the front end of the system. And what we did is we did two things at the same time: We strengthened the habitual offenders' sentences, and we looked at a way to keep the people that should be in jail longer, ways to keep them in. For instance, we abolished parole for a second-time crime of violence. We did a lot of things to keep these people in.

At the same time, we started looking at the front end of the system; and I think we've always got to look at the front end of the system, with things like halfway houses, restitution centers, shop probation. These are some of the things we have implemented to keep people from going into the prison system. We have pretrial intervention. Johnny Mack Brown started one of the first pretrial intervention programs in the State of South Carolina. I put almost 1,000 people in pretrial intervention last year, so we've got to keep looking at the front end, looking at ways to deal with the nonviolent first-time offenders.

Chief Bain talked about housing them for $10 a square foot on weekends, as opposed to $100. It costs $12,000 a year to keep a prisoner in jail. So if we keep looking at the front end of the system and make sure there is always a bed open for these violent offenders.

We have in South Carolina some of the toughest trafficking laws of any State. If you get to the top level of trafficking, I can put somebody in jail—and have put many people in jail—for as much time as a murderer is going to serve, because we have given people 25 to 30 years with no parole. They still get one-third off their sentence for good time, but if I give somebody 30 years, they have got to serve almost 20 years to the day.

So we've got tough laws, and I think we are going to see less of these horror stories, where somebody on a 10- or 20-year sentence is getting out in 2 months or 2 years, or something like that. But I think we always have to work on it. We always have to make sure we have a bed open for the drug trafficker and violent criminal, and at the same time look for alternatives.

Nobody says we're not going to have to build prisons. You said you're building 33,000 beds now. The State is going to have to keep building beds; but, hopefully, we won't have to build as many beds if we keep working on it.

MOBILE PRISON CELLS

Senator HOLLINGS. We've got one manufacturer here in Greenville that's making the mobile prison cells that we're trying to institute down there, trying to cut off that spigot, Johnny Mack. They're coming over the Mexican border, and they're all back and forth. Well, how do you seize them; how do you keep them, and everything else? You have to run the jails out to them and put them all in. And they're manufacturing that, and I've had Federal officials come down and look at these portable prisons. I'm confident that's going to help us, some of those mobile prison cells.

CHEMICAL DIVERSION

In Colombia, South America, we find that there are six chemicals that go into making cocaine; and the main one is something that is called MEK, methyl ethyl ketone. And 90 percent of MEK shipped out of the United States goes right to the drug lords to manufacture cocaine. We've got a so-called international agreement, but only four countries have signed it. We got it in 1987, but only four countries have signed it.

It used to come straight from the United States; now they're shipping it, instead, through The Netherlands. But if we can cut those chemicals out, no drug lord, even with $1 million, can manufacture except with a factory that's easily discoverable and destroyed. And I hope we can do it at that level.

There is only one other subject we haven't mentioned, and that's money laundering. Do you have that at all in this Piedmont area?

Mr. **Bridges**. Yes, sir.

Senator **Hollings**. You do?

Mr. **Bridges**. Yes, sir.

Senator **Hollings**. You're working with the banks?

Mr. **Brown**. Yes, sir.

Senator **Hollings**. Do they have a program at all of surveillance and checks and doublechecks and so forth to help you in the law enforcement within our State?

Mr. **Bridges**. We have a white-collar crime investigator that works closely with the banks. As far as a program to actually seek out and keep tabs on that, I don't know; I don't know of one.

Mr. **Brown**. We have used the Federal court very successfully in money laundering scams. We allow them to adopt our cases, and we're hitting some pretty hard.

Senator **Hollings**. Well, South Carolina is fortunate to have officials like yourselves, and the committee is really indebted to each of you here this morning. I'm going to leave the record open for any additional comments you wish to make. Are there any additional comments at this time?

Mr. **Brown**. I'd just like to say one thing.

Senator **Hollings**. Certainly.

Mr. **Brown**. Thank you for coming, and thank you for allowing me to be a part of this hearing. I think the answer is not easy, and I think you realize that; but I just want to thank you very much for being a part of it.

Senator **Hollings**. Well, I think this has got a salutary effect. If we can get a series of hearings all over the United States, and hear from some of you solicitors and local law enforcement officials, it will bring to the public attention that there is something that is sort of still an undercurrent. I get to see more and more and more of it, but it's even bigger than what I thought, when I come down here and listen. This drug situation is completely out of hand in a good old law-abiding State.

You know, that's how I sell and bring in industry. I tell them how we've got law and order down here, and a day's work for a day's pay, and everything else; but according to you folks, this is a good place to get drugged. And it's no different from any other place. It's countrywide, and in North Dakota and places like that. And we have to watch.

ADMINISTRATIVELY UNCONTROLLABLE OVERTIME

Now, you're talking about those budgets. Yes; we had to pay the FBI overtime, so we heard on January 29, the Assistant Attorney General said he was going to cut hundreds of FBI agents. They take the overtime pay, so they have to cut the agents. We're talking about the war, but then we cut back; and we're having to jump back on them again, put more money in, and everything else of that kind. It's a constant struggle when they're trying to cut us—our DEA agents, where they're trying to cut us; our FBI agents. And yet at the same time we're talking about the additional money and the greater effort that is being made.

Now, Chief Bain, you really put it on the line. It's got to be everybody at every level, in the schools, in the churches, in our society; and teach them like we did with smoking. I don't see anybody smoking here. If I would have come up here 25 or 30 years ago, everybody would have been smoking. But we find out that's really injurious to your health, and we've got to learn that this drug thing is the worst menace to our society. Only then will we see a real decline in drug use.

SUBCOMMITTEE RECESS

The subcommittee thanks you, and we will be in recess until 2 o'clock this afternoon for our second session. Thank you all very much.

[Whereupon, at 11:10 a.m., Tuesday, February 13, the subcommittee was recessed, to reconvene at 2 p.m., the same day.]

(AFTERNOON SESSION, 2:10 P.M., TUESDAY, FEBRUARY 13, 1990)

NONDEPARTMENTAL WITNESSES

STATEMENT OF NANCY JONES, PUBLIC AFFAIRS DIRECTOR, WSPA-TV

Senator HOLLINGS. The subcommittee will please come to order.

The record will show that we are already seeing results. I have just been delivered a copy of the Greenville Piedmont, and on the front page is "State to Get Seven New U.S. Attorneys." Yesterday, in the day-long hearing we held in Columbia, we had our U.S. attorney, Bart Daniel, and he was outlining the fact that we needed more help, and everything of that kind. We have provided the money for 940 new attorney and support positions and we weren't getting any more, really, in South Carolina. The cases were there, and everything else, but they weren't being handled. The Attorney General tried to call me, and I tried to call him last night; but I see now by the headline why he was calling. So you folks keep testifying for me, and we'll get help at that Washington level.

I tell you, this has been an education for me already. I was just telling the news that the drug menace is far more permeative of our society, it's a greater menace than I ever imagined. And I say that from an experience standpoint. Our subcommittee of appropriations allocates every dime expended by the FBI, the U.S. attorneys, the U.S. judicial system, all the judges, the parole system, the U.S. marshals, the Drug Enforcement Administration, the Immigration and Naturalization Service; and I could go on and on. I've been on this subcommittee for 20 years, served as the chairman for 10; and I see how my budgets are growing. And, then I come home on the front line and find out how we're still way, way behind the curve.

There are some silver linings, and we have that, the record will show, this afternoon, in those who are about to testify; because there's no doubt that the only way this is going to be solved is through education and through community involvement. And we have no better community involvement than our panel this afternoon: Cheryl Funderburk with the Pickens County Council on Alcohol and Drug Abuse, Karen Abrams of the Greenville Families in Action, Lydia Braggs of Phillis Wheatley Association, Nancy Jones of WSPA, Dr. Roy Greene with the school district of Greenville, and Julianne Bartos of Furman University.

The subcommittee particularly wanted this testimony because we don't have the coordinated local interest and local involvement that you have up here in the Piedmont section. And so we welcome you here this afternoon.

I'm going to let you go ahead and deliver your statements. I'll start over here with Ms. Jones and go right on across, and then we'll submit questions. Thank you very much. We're glad to recognize you first, Ms. Jones.

Ms. **Jones**. Thank you, Senator Hollings. On behalf of Nick Evans, president of Spartan Radiocasting Co., Inc., I'm Nancy Jones, public affairs director at WSPA-TV. I've worked in the media over 10 years and have aired thousands of public service announcements for countless numbers of organizations serving the community, and I've helped implement many worthwhile projects that have the impact on the way people live and are aware of their fellow man. For example, Alzheimer awareness, organ donor campaign, Children's Hospital fundraising for needy families, and the list goes on. The most recent campaign at WSPA-TV is the Time To Care project.

I am here today to comment on what we as a medium have done in the area of drug prevention awareness and to project a direction of where we go from here.

What have we done?

You all remember the cry of alarm when the ad council introduced the PSA that depicted a raw egg cracked and dumped into a hot frying pan with the message, "This is your brain, this is your brain on drugs." People were shocked, people were startled, and people related to what the public service announcement said. Some stations across this country did not air that spot at first because it was too harsh. Meanwhile, the drug war escalated.

Today, WSPA-TV has on its air, public service announcements from the Partnership for a Drug-Free America that realistically show what the battle against drugs is like and the message is clear: "We are at war and the battleground is your home and your streets. Be aware and don't ignore it. You can do something about it." Those spots are aired often and at all times of the day. We have committed to doing public service announcements for prevention groups and prevention programs that need to let people know that they exist. We have encouraged agencies that produce public service announcements to direct more attention to the very young viewers. This age group from 5 and up cannot comprehend graphic messages on drug pushers, but they must begin their awareness to formulate clear decisions to stay drug free and that there is an easy way to "Just Say No.

To this direction, on April 21—that's a Saturday—at 10:30 a.m., all three networks will block regular programming to air a program directed at these young people, and it's titled "Cartoon All-Stars" which is a drug-free message in cartoon form. The idea is to not give them an alternative to switch channels. By way of doing that, the message is there for them to face it, to hear it, and we hope, to absorb it.

As I mentioned, we are currently involved in a campaign called the Time To Care which focuses on volunteerism and encourages people to be volunteers and take time to care about others. We focus on who is volunteering and companies who support volunteerism. Our sponsors, Greenville Hospital System, South Carolina National Bank, Hardee's, and Carolina Ford dealers back the project and demonstrate through their own organizations what volunteers are by setting the example. This year, that project will take a new direction by looking at youth volunteerism, especially the youth involved in the drug-free programs in area schools.

Many schools have sent teams to the Teen Institute of South Carolina which is an educational and training process to help teams of students and adult advisers implement prevention programs through positive peer pressure. I'm sure you're very much aware of that. The institute provides facts and skills necessary to address the prevention of alcohol and other drug-related problems among youth. In our area, these teen groups have become active in their schools and, in turn, have taken the program into the elementary schools in the form of skits and 1-on-1 peer counseling sessions. We are going to recognize these groups as volunteers who are taking the time to care. As a media we are going to make their efforts a crusade that other youth can join—and be aware. Schools such as Broome, Whitlock, and Chapman High Schools have applied for grants and received moneys to develop more active drug prevention programs. The students write their own programs, their own projects, and get funding for it; and I'm sure you're well aware of that. The students are applying for these moneys, and South Carolina is making it available. We, as a media, want to recognize and encourage that type of working together. We recognize that a unique situation exists for our youth—they are the problem, they are the victims, and they are the solution in this drug war—we must be aware and we must make others aware.

What else have we done?

WSPA has used local programming to focus on parent groups and teacher groups that are offering counseling and proactive support on understanding drug prevention and drug and alcohol problems. The Families in Action Resource Program is growing with requests for parent-to-parent programming to be initiated in companies. Resources are lacking to implement it fast enough to answer the need. The public needs to be aware of the need and how they can get involved. Several of our Sunday morning "Contact" segments look at these issues.

Our news department is focusing on crime and through a segment called Crime Watch looking closely at the problem and encouraging people to report the crime if they see it or know of details about it that would aid the investigation. Crime Stoppers is active in our upstate area and needs our support. We are working closely with Crime Stoppers to produce reenactments of crime to enlist viewers' help in solving the crime. Crime Stoppers offers a reward for information leading to conviction and the calls are kept confidential and anonymous. Later this month, area Crime Stoppers groups are going to meet at WSPA-TV to map out a more unified campaign and offer assistance to each other in implementing the program. We know, of course, that they meet on a regional level; we know that they meet on a State level. But we need to help them in upstate to get that unified message across. We as a media need to help this unification and awareness.

What, as a media, have we done? Not nearly enough. Our next step is to look at what we can do and improve on what we are doing. Our role must be that of awareness and watchdog. We must become an educated media. We are attempting to get groups of media representatives to take the program at Teen Institute to know first hand what it is teens face and how they can fight the drug battle. An educated media can report the crime and an educated media can report the prevention.

We must trace the moneys that are hard won for South Carolina and see that those dollars are well spent as well as well distributed—accountability for those programs.

We must not sugar-coat the message that there is a drug problem. We need to be encouraged to devote more of our programming to drug prevention programs. We need support as well and we need a clear message to distribute.

We can give media attention to the drug and alcohol problem and we can also give media attention to the drug and alcohol solution. We need to all become antidrug pushers and develop an antidrug cartel that makes it tough to do drugs, stay on drugs, and sell drugs—unite the message and unite the effort—we cannot be fragmented in our approach. Just as a company develops a marketing plan to sell itself to the consumer, so must we work together and market our antidrug and antialcohol efforts.

The media has played an important part in the educational process, saying that drinking and driving is socially unacceptable. We must deliver that same message to all families of the world, and especially the youth, that getting involved in drugs is socially unacceptable. All of the Spartan radiocasting stations are charged with pursuing this effort as I know that other media in the area and other companies are.

Drug awareness, drug education, and drug prevention need to be important to us all. Thank you very much.

Senator HOLLINGS. Very good, very good. Thank you.

STATEMENT OF DR. ROY GREENE, GREENVILLE SCHOOL DISTRICT

Senator HOLLINGS. Dr. Greene?

Dr. GREENE. Thank you, Senator Hollings. The school district of Greenville County has been providing substance abuse education for many years. In January 1983, the superintendent appointed a task force and a community advisory committee to make a comprehensive study of the problem and possible remedies. The task force reported its findings and made recommendations to the board of trustees. As a result, in May 1983, the board of trustees mandated the development of a comprehensive substance abuse education program which would eventually reach every student on a regular basis. These efforts resulted in the adoption and implementation of a comprehensive substance abuse curriculum called Here's Looking At You, Two.

Here's Looking At You, Two is a comprehensive alcohol and other drug education program for students from kindergarten through high school. The program includes a teacher training program.

The basic philosophy of Here's Looking at You, Two is that alcohol and drug abuse problems among young people will decrease if youth have a greater degree of self-esteem; are better able to cope with life's problems; have current facts about alcohol, other drugs, and chemical dependency; and are more skilled at making decisions and handling interpersonal relationships. Thus, the curriculum has four main components: Information, decisionmaking, coping, and self-concept.

The curriculum can easily be integrated into all subject areas with appropriate modifications. A variety of learning strategies such as films, discussions, individual and group projects, games, puzzles, and puppets are included at appropriate grade levels to appeal to various learning styles.

Here's Looking At You, Two is the core of our substance abuse curriculum. Other programs have been added to supplement the curriculum.

The school district cooperates with the Greenville County Commission on Alcohol and Drug Abuse in the School Intervention Program [ScIP]. The staff of the commission provides services to students of the school district who have been referred to them. These services include counseling, prevention intervention, and referral services.

The counseling services are provided to individual students, groups of students, and often includes other family members. Students are offered help in the areas of decisionmaking, goal setting, problem solving, coping skills, increasing self-awareness and self-esteem, and alcohol and drug abuse awareness.

The Greenville County schools and law enforcement officials are working in a cooperative effort in a program for fifth grade students called drug abuse resistance education [DARE]. DARE is presently provided in 11 elementary schools and will be expanded as resources are acquired.

The DARE program focuses on fifth graders. Students are taught 17 lessons, once a week by a uniformed officer on topics such as the consequences of drug use, resisting peer pressure, building self-esteem, managing stress, making hard decisions, and finding positive role models. Officers teaching the DARE classes receive 2 weeks of training before they begin teaching.

The Greenville Teen Institute is an alcohol and other drug abuse prevention education and training program with weekend retreats for high school students and adult leaders. Through large group sessions, discussion groups, short courses, project planning sessions, and recreational activities, each team is prepared to promote healthier lifestyles and alternatives among other youth. The weekend retreat attempts to enhance the participant's understanding of alcohol and other drug abuse, self-concept, and positive peer influence.

Since 1985, approximately 39 student teams have developed alcohol and other drug prevention projects for implementation in their respective schools and communities. Some members of previous GTI teams have subsequently participated in the South Carolina Teen Institute for Alcohol and Drug Abuse Prevention during the summer.

Teen Leadership Connection [TLC] is an extension of the Greenville Teen Institute. Teen Leadership Connection has been established to develop and enhance the leadership skills, personal development skills, and planning skills of middle school students.

The students who attend the TLC retreat seek to lead their peers in implementation of alcohol and other drug abuse prevention activities within their schools.

THE ANNUAL "JUST SAY NO" ACTIVITIES

As of the spring 1989, over 35 elementary schools and community organizations formed "Just Say No" clubs to help young people participate in a national movement to resist drug abuse and reinforce healthy, productive lifestyles. The "Just Say No" campaign is a cooperative effort of the district I PTA, WYFF-TV, Greenville Families in Action, the Greenville County Commission on Alcohol and Drug Abuse, the Optimist Club of Greenville, the school district of Greenville County, and many others, including teachers, counselors, social workers, and law enforcement.

More than 1,500 young people participated in the "Just Say No" walk and rally on May 11, 1989, at city hall on Main Street and in Cleveland Park. Additional "Just Say No" activities are planned for the 1989-90 school year.

THE RED RIBBON CAMPAIGN

This is a part of community efforts to focus the community's attention on substance abuse and educational needs to combat the problem. Red ribbons are prominently displayed throughout the community during 1 week to accomplish this attention-getting goal.

TEEN PARENT PROGRAM

This is a substance abuse education program for pregnant teenagers and teenagers with children. This sometimes includes the fathers.

PUBLIC SERVICE ANNOUNCEMENTS

In cooperation with WYFF-TV, a PSA contest was held. Students in their English classes developed PSA's. These were submitted and four winners selected. The students who submitted the PSA's were involved in producing and appearing in the PSA's. These were televised by WYFF-TV during the summer of last year.

SUBSTANCE ABUSE EDUCATION TRAINING FOR TEACHERS

Here's Looking at You, Two in-service. Over 1,000 Greenville County teachers have received 2 days of training to prepare them to use this program in their classes.

THE GREENVILLE HOSPITAL SYSTEM

A program called add life is provided at the hospital's drug rehabilitation facilities. This provides an understanding of addiction to drugs.

FURMAN UNIVERSITY

Offers graduate courses in substance abuse education for teachers and for others.

THE UNIVERSITY OF SOUTH CAROLINA

Offers graduate courses in substance abuse education for teachers and for others.

GREENVILLE TECHNICAL COLLEGE

Offers a course Operation Vision for teachers and other adults in drug awareness education.

FEDERAL FUNDING FOR GREENVILLE COUNTY

In 1988-89, we have received $171,766 for public and private schools.

In 1989-90, we received $223,211 for both public and private schools.

The following 5-year plan reflects the minimum financial needs for the district's substance education abuse program:

Year one, 1989-90.—In-service training workshops for 200 teachers. Materials for K-12. Organize and/or maintain four student peer counseling groups (ex. Natural Helpers); five "Just Say No" clubs; a student team for Teen Institutes (local and State) per school; school intervention program [ScIP]; graduate courses in drug education for 25 teachers; theatrical groups (ex. Great American Medicine Show), drug education skits; conduct alcohol and other drug abuse surveys.

The total cost for year one is $223,211.

Year two, 1990-91.—Analyze drug usage survey data and plan accordingly. Summer drug education institute (40 teachers); implement supplementary program focusing specifically on alcohol, tobacco, and marijuana, for grades K-8; this will be piloted in one attendance area of the school district (funding source: Grant $118,000); Teen Leadership Connections (miniteen institute for middle schools); in-school training workshops for teachers for 200 teachers; materials for K-12; four student peer counseling groups; five "Just Say No" clubs; Teen Institute teams (local and State); graduate courses in drug education; student theatrical groups (ex. drug education skits and plays, PSA's).

The total cost for the second year is $289,000.

Year three, 1991-92.—Drug education conference for teachers (the cost is substitute pay when necessary and registration fees); in-service training workshops for 200 teachers; materials for K-12; four student peer counseling groups; five "Just Say No" clubs; Teen Institutes (local and State); graduate courses in drug education for 25 teachers; School Intervention Program; Summer Drug Education Institute for 40 teachers; Teen Leadership Connection for middle school students; continue implementation of supplementary programs K-8 focusing on alcohol, tobacco, and marijuana.

The total cost for year three, $347,000.

Year four, 1992-93.—Organize and train student assistant groups; organize and train parent support groups (PTA); in-service training workshops for teachers, for 200 of them; materials for K-12; four peer counseling groups; five "Just Say No" clubs; Teen Institutes (local and State); graduate courses in drug education for 25 teachers; Summer Drug Education Institute for 40 teachers; evaluate and expand supplementary programs focusing on alcohol, tobacco, and marijuana, implementation in year two.

The total cost for year four is $372,000.

Year five, 1993-94.—Organize school-community substance abuse intervention network; in-service training workshops for teachers

(200); materials for K–12; four student peer counseling groups; five "Just Say No" clubs; Teen Institutes (local and State); School Intervention Program; graduate courses in drug education for 25 teachers; districtwide PSA (public service announcement) campaign 6–12; evaluation of all segments of district's substance abuse prevention program K–12.

Total cost, $397,000.

SUMMARY

The school district of Greenville County is keenly aware of the threat to our students which is ever present in the form of many illegal and legal substances. There are many positive factors, described above, which can help each individual student develop the skills and strengths necessary to avoid abuse of any substance and hopefully maintain control of their lives in a positive, productive way. The school district is committed to the high goal of developing all of our students into positive, productive individuals. Thank you.

Senator HOLLINGS. Very good, very good, Dr. Greene.

STATEMENT OF LYDIA M. BRAGGS, PREVENTION SPECIALIST, PHILLIS WHEATLEY ASSOCIATION

Senator HOLLINGS. Ms. Braggs.

Ms. BRAGGS. Thank you, Senator, for having me here today on behalf of the Phillis Wheatley Association. I would like to speak very frankly and honestly with you today about the drug problem in the black community. The Phillis Wheatley Association has played an important role in providing social welfare services to the people of Greenville for the past 70 years, sir. Since the early eighties, Phillis Wheatley has been aware of the threat drugs pose to Greenville's future, and we actively sought funding for our first drug prevention program.

With a grant from the Greenville County Commission on Alcohol and Drug Abuse and the United Way Agency, we funded our first prevention program. Consequently, we saw a need to develop other programs, sir, and we established a Repertory Theatre group in 1985. Although that program provided alternatives to kids, it didn't provide an economic component; and to deter kids from using drugs, you have to involve them or provide some means for economic success. So we developed a new urban high risk project that does have an economic component.

Our Primary Prevention Program is a comprehensive program that begins at the preschool level, where the focus is to help children feel good about themselves. In addition, we begin to educate these children on the evils of abusing alcohol, over-the-counter drugs, cigarettes, and prescription medications. As the child matures, we increase their level of knowledge by introducing more drug information. However, no prevention program is complete without parental and community involvement. We involve the parents early by requiring that they attend monthly meetings, where we provide workshops that utilize the skills and talents of other agencies and organizations, to provide parenting information and to make known the available resources in the county.

The antidrug musical production "Don't Give Up on Your Dream!" was originally developed at the Phillis Wheatley Center. The Repertory Theatre is a unique musical theater company that provides positive alternatives to drug use to the talented middle and high school students in the area.

Since its first production in the summer of 1988, the presentation has been performed throughout the State of South Carolina, in Georgia and Florida. Requests have been received for performances in North Carolina, Alabama, Virginia, and Washington, DC. The documentary on the making of this production and its performers was aired by ETV on September 14, and a film adaptation of the stage show was aired on September 21.

"Don't Give Up on Your Dream!" has exceeded all expectations, and it has successfully deterred 25 regular cast members from the use of alcohol and other drugs. In addition to that, sir, 10 cast members have graduated from that production, and all have entered college. This is truly an indication of "Don't Give Up on Your Dream's!" success.

Effective prevention programs are not limited to education and training, but they also must provide positive life experiences through alternative activities that promote healthy, productive lifestyles. Phillis Wheatley's new drug prevention program provides participants with structured alternative activities, as well as providing opportunities for economic success. The program has four components which are: The Youth Outreach Network, which trains youth to deliver presentations to other youth and adults on the topics of substance abuse, AIDS, suicide, and teen pregnancy. Currently, 17 youth are performing "The Great American Medicine Show," which is a program of the South Carolina Commission on Alcohol and Drug Abuse that teaches teens and other adults about drug abuse and drug-related problems through skits.

Since September 1989, the group has given six performances in Greenville, Spartanburg, Anderson, and Laurens Counties, with requests for more performances. More importantly, these youth submitted a proposal to the South Carolina Commission on Alcohol and Drug abuse for a teens as resources against drugs grant, which is funded by the National Crime Prevention Council. They were awarded a $1,500 dollar grant to implement project SSCAP, which is students and senior citizens awareness project, that educates students and senior citizens on the dangers of combining prescription and over-the-counter medication with alcohol.

The physical fitness component promotes total physical development. Countywide physical fitness events are held each year. Participants who meet the President's physical fitness standards for their respective age groups have their names submitted to the President's Physical Fitness Council, and are awarded a certificate and a patch for excellence in physical fitness.

The drill team component teaches discipline through military drill. To date, seven competitive drill teams have been formed in low-income housing areas.

Trained volunteers hold weekly drill practices at various sites across the county. Children are encouraged to do their school work and to achieve academically. Suspension from school automatically disqualifies participants from the upcoming quarterly drill competition; however, suspended students are required to attend scheduled drill practices. Piedmont Manor, as you all are aware, is one of the areas hardest hit by drugs; and they have a drill team that best demonstrates this component of the program. Acting volunteers for the team are community patrol officer Thomas Jefferson and Piedmont Manor housing manager Maurice Mitchell. And, as you can see, we demonstrate through this that we network with other agencies and resources in the county to implement our prevention efforts. Together these men have taken faltering youth and turned them into enthusiastic, motivated, and competitive youth that proudly chant, "Everywhere we go, people want to know, who we are and where we came from."

The entrepreneurial component teaches youth about the world of business and finance. Participants learn how to start and operate a business. The team selects one project to develop into a business. Once the product is marketed, participants will receive one-half of the money they make, with an option to invest or save. I think this is critical for prevention programs that target at-risk youth in the nineties, that they include an economic component. Because we have to teach these kids and show them how to make money if we are going to deter them from using drugs, because it's so easy.

In conclusion, more Federal funding is needed for prevention and treatment programs. Early education is the key in combating drugs. More money is needed to offset the increasing turnover rates in the prevention profession. For example, Phillis Wheatley's Primary Prevention Program has not received any cuts, but they have also not seen any increases in the budget since 1983. The current budget is inadequate, and it does not allow the agency the ability to pay competitive salaries, provide job-related training, and to purchase supplies for the program.

Successful prevention programs that target at-risk youth must provide opportunities for educational and economic success through ongoing alternative activities.

Federal funding for existing programs such as drug free money for the schools should be continued. Unfortunately, the school system's ability to involve at-risk youth's parents is limited; therefore, Federal support must be made available for community-based prevention. Drugs are sold on the streets and so prevention efforts must be taken to the streets. Prevention efforts must go beyond a 9-to-5 work effort because drugs are sold 24 hours a day, 7 days a week. Thus, increased Federal funds are needed for prevention. Thank you, sir.

PREPARED STATEMENT

Senator HOLLINGS. Very good, Thank you. We will insert your statement in the record at this point.

[The statement follows:]

STATEMENT OF LYDIA M. BRAGGS

INTRODUCTION

Of particular concern to those of us who favor increased federal support in the areas of prevention and treatment, is the issue of how to combat drugs, when so little money for manpower exists to bring resolve. The threat that drugs pose to all of us is the deterioration of the family structure; the educational system and our economic base.

Greenville, like other metropolitan areas across the nation, is in a state of emergency. Crack/cocaine hit the streets like an uncharted storm, leaving a path of corruption evident to all.

Blue-collar and low-income housing areas bear the brunt of the storm of crack's vengeance. In black communities, fear of drugs and attendant crime are at an all-time high. Rates of drug related homicide and crime have soared. Black on black crime is increasing; and it is directly linked to use, sale, and distribution of illegal drugs.

According to the South Carolina Commission on Alcohol and Drugs and the State Law Enforcement Division, Black Americans are disproportionately represented in drug arrest and for the use of illegal substance.

Specifically, we have seen in Greenville a significant increase in the use of crack/cocaine of epidemic proportion; and a decrease in the use of marijuana, sedatives and other stimulants. This trend is apparent state wide.

The widespread use of crack/cocaine is attributed to its availability, low price and increased demand. Because of crack's highly addictive nature, users become chronic sooner than we see with other drugs. Furthermore, crack/cocaine is flourishing because of the state's easily accessible coastline and interstate highways. Rural communities are not equipped to meet the law enforcement needs crack presents. So, rural areas have become havens for drug dealers.

Because the profit margin on sales from one kilogram of cocaine is over 700 percent, black communities, specifically, public housing projects, have become combat zones. Anderson Road, City Heights, Washington Street, West Greenville, Jesse Jackson Townhomes, and Piedmont Manor areas of Greenville County are hardest hit by drugs and related crimes. Citizens remain captives in their homes, afraid to act or speak out against known pushers.

Posing yet another threat to the children of these areas and widening the scope of the crack crisis in Greenville, is the number of crack houses identified by officials. In March 1989, the Greenville County Sherriff's Office identified 21 crack houses in Greenville's westside alone with many more within city limits. Because of increased efforts by the police to decrease "curb side service" for crack, crack dealers have moved their operations into abandoned houses and junk cars for manufacture, sale, or use of the drugs. Children living near crack houses are at greater risk of becoming involved with the drug trade or becoming the victims of a crime. It is not uncommon for children of these areas to find drug paraphernalia. However, children who find syringes could infect themselves with the AIDS virus or other infectious diseases, unaware of the dangers the intravenous drug paraphernalia poses.

In the area of health, we see the number of drug-related emergency hospital admissions increasing. More babies are being born each year to mothers who use drugs. According to Myron Hosea, Director of Public Relations of Greenville Memorial Hospital, testing babies for drugs began in May 1989. The first positive tests were confirmed in June of 1989. To date, 23 babies have tested positive for cocaine; 3 for heroin, and 2 for cocaine and heroin. This represents 2.9 babies being born addicted to drugs per month. If the current trend remains the same, by the end of 1990, 35 babies will have been born addicted to drugs in Greenville County alone.

STATEMENT OF NEED

The conditions of poverty breed hopelessness and despair. Parents of children who live daily in poverty face the frustration of not being able to pay bills and provide their children with basic necessities that more fortunate parents take for granted. Discouraged, these parents of low socio-economic status, who lack the necessary educational skills and experience to find adequate employment, turn to drugs to escape reality.

They soon become addicted to drugs and need treatment. Consequently, no positive role models exist in the home, and the children of these circumstances suffer educationally, economically, physically and emotionally.

Children of these circumstances turn to a life of drugs and crime to make money to buy gold chains, clothes, shoes, food and to help make ends meet at home. As a result, these children do poorly in school, have low self-esteem, and behavior problems which contribute to delinquency, teen pregnancy and future drug abuse.

For these reasons, it is extremely difficult to tell a child from the projects, whose entire existence has been one of social and economic deprivation, to "Just Say No" to drugs. Clearly, we need more federal support for Prevention/Treatment programs. We must provide education and training to parents and youth; provide positive alternatives that lead to educational and economic success. Furthermore, persons with addictions need to have low-income treatment facilities available that allow them to recover so that they will resume their rightful place as role models within their family.

PHILLIS WHEATLEY'S IMPACT ON THE PROBLEM

The Phillis Wheatley Association has played an important role in providing social welfare services to the people of Greenville for the past seventy years. The agency has shouldered the tasks of offering or causing to be provided health and welfare, social, cultural and spiritual opportunities for the people of Greenville since it was founded in 1919. Since the early 80's Phillis Wheatley has been aware of the threat drugs pose to Greenville's future, and we actively sought funding for our first drug prevention program.

With a grant from the Greenville County Commission on Alcohol and Drug Abuse, the Primary Prevention program was implemented in 1983. The United Way of Greenville County also provided funds for this program. To keep pace with the city's growing drug problem, the Phillis Wheatley Repertory Theatre For Youth was formed in 1985 as a preventive strategy to deter drug abuse. After examining the needs of our service delivery area, we realized that none of our present prevention strategies provided participants opportunities for economic success.

Consequently, a new Urban High Risk Project was developed with an economic component and is being funded by a grant from the South Carolina Commission on Alcohol and Drug Abuse.

The Primary Prevention Program is a comprehensive program that begins at the pre-school level, where the focus is to help children feel good about themselves. In addition, we begin to educate these children on the evils of abusing over the counter drugs, prescription medication, alcohol and cigarettes. As the child matures, we increase their level of knowledge by introducing more drug information. However, no prevention program is complete without parental and community involvement. We involve the parents early by requiring that they attend monthly meetings, where we provide workshops that utilize the skills and talents of other agencies and organizations, to provide parenting information and to make known the available resources in the county.

The anti-drug musical production, "Don't Give Up on Your Dream!", was originally developed at the Phillis Wheatley Center in Greenville, South Carolina, by writer and composer Dwight Woods, along with a corps of talented writers and lyricists, for the Phillis Wheatley Repertory Theatre for Youth—a unique musical theatre company that provides positive alternatives to drug use to talented middle and high school students.

Since its first production in the summer of 1988, the presentation has been performed throughout the state of South Carolina, in Georgia and Florida. Requests have been received for performances in North Carolina, Alabama, Virginia and Washington, D.C. The documentary on the making of this production and its performers was aired by ETV on September 14th and a film adaptation of the stage show was aired on September 21, 1989.

"Don't Give Up on Your Dream!" has exceeded all expectations and it has successfully deterred 25 regular cast members from the use of alcohol and other drugs. More importantly, peer lead and initiated prevention strategies have the most impact and it is estimated that some 11,000 at-risk youth across the southeast have been touched by this "Just Say No" message. Furthermore, Don't Give Up on Your Dream!" has inspired youth across the state and to date, adaptations of this production have been performed by Lower Richland County and the Henderson-Davis Theatre at South Carolina State College in Orangeburg. In the last two years the production has graduated 10 cast members and of those 10, all have entered college. This truly is an indication of the success of "Don't Give Up on Your Dream:".

Live performances are with "no admission" for youth and the community as a whole. So grants and sponsorship funds are essential to the continued success of this project. At present, no funds are available to further this work and we are actively seeking a funding source.

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The Youth Outreach Network trains youth to deliver presentations to other youth and adults on the topics of Substance Abuse, AIDS, suicide and Teen pregnancy.

Currently, 17 youth are performing, "The Great American Medicine Show" which is a program of the South Carolina Commission on Alcohol and Drug Abuse that teaches teens and adults about drug abuse and drug related problems through skits.

Since September 1989, the group has given 6 performances in Greenville, Spartanburg, Anderson, and Laurens Counties with requests for more performances. More importantly, these youth submitted a proposal to the South Carolina Commission on Alcohol and Drug Abuse for a "Teens As Resources Against Drugs" grant which is funded by the National Crime Prevention Council. They were awarded a $1,500 grant to implement project SSCAP (Students and Senior Citizens Awareness Project) that educates students and senior citizens on the dangers of combining prescription and over-the-counter medication with alcohol.

The Physical Fitness component promotes total physical development. Countywide Physical Fitness events are held each year. Participants who meet the President's Physical Fitness Standards for their respective age group in all events, names are submitted to the President's Physical Fitness Council; and are awarded a certificate and a patch for excellence in physical fitness.

The Drill Team Component teaches discipline through military drill. To date, seven competitive drill teams have been formed in low-income housing areas.

Trained volunteers hold weekly drill practices at various sites across the county. Children are encouraged to do their school work and to achieve academically. Suspension from school automatically disqualifies participants from the upcoming quarterly Drill Competition. However, suspended students are required to attend scheduled drill practices. Piedmont Manor's Drill Team best demonstrates this component. Acting volunteers for the team are Community Patrol Officer Tom Jefferson and Piedmont Manor Housing Manager, Maurice Mitchell. Together these men have taken faltering youth and turned them into enthusiastic, motivated and competitive youth that proudly chant, Everywhere we go, people want to know, who we are and where we came from . . .".

The Entrepreneurial component teaches youth about the world of business and finance. Participants learn how to start and operate a business. The team selects one project to develop into a business. Once the product is marketed, participants will receive half of the money they make with an option to invest or save their profit. The remainder of the money goes back to the company for reinvestment into the company for other types of investments.

In conclusion, more federal funding is needed for prevention and treatment programs. Early education is the key in combating drugs. More money is needed to offset the increasing turnover rates in the prevention profession. For example, Phillis Wheatley's Primary Prevention program has not received any cuts but they also have not seen any increases in the budget since the program began in 1983. The current budget is inadequate and does not allow the agency the ability to pay competitive salaries, provide job-related training and to purchase supplies for the program.

Successful prevention programs that target at-risk youth must provide opportunities for educational and economic success through ongoing alternative activities.

Federal funding for existing programs such as drug free money for the Schools should be continued. Unfortunately, the school system's ability to involve at-risk youth's parents is limited. Therefore, federal support must be made available for community based prevention effort. Drugs are sold on the streets and so prevention efforts must be taken to the streets. Prevention efforts must go beyond a nine to five work effort because drug dealers work twenty-four hours a day, seven days a week. Thus, increased federal funds are needed for prevention.

STATEMENT OF KAREN ABRAMS, EXECUTIVE DIRECTOR, GREENVILLE FAMILIES IN ACTION, INC.

Senator HOLLINGS. Ms. Abrams.

Ms. ABRAMS. Senator Hollings, thank you for the opportunity to be here today. I'm Karen Abrams, executive director of the Greenville Families in Action.

Greenville Families in Action is a community-based consortium of parents, educators, religious and business leaders, and other professionals who have since 1984 addressed adolescent use of alcohol, and other drug problems in Greenville County. Our approach to these problems focuses on education, awareness, and safe alternatives toward parents, youth, and educators. We believe that the problem can be best addressed by local groups who are working with local populations.

Greenville Families in Action is a multifaceted agency, seeking to build a positive atmosphere for young people. By combining awareness with education and training to change trends, we hope to develop capable and responsible youth and adults in Greenville County. Our programs target the root causes of negative behaviors of young people before they get into trouble. Those root causes, poor self-esteem, unclear values; lack of decisionmaking and coping skills; inability to set and reach short- and long-term goals; lack of positive role models; lack of real world success experiences; no clearly defined belief systems; lack of support systems; and an emphasis on accumulation of material things, are addressed in the philosophy of Greenville Families in Action, all of our programs, training, and educational materials.

We currently maintain a comprehensive Family and Youth Resource Center with videos, films, books, and pamphlets on adolescent issues including stress, depression, suicide, alcohol and other drugs, teen pregnancy, sex education, AIDS, parenting skill building, and instilling motivation of successful life skills and healthy lifestyles for young people. These are used by schools, community centers, churches, social service agencies, teacher in-service training, and individual families seeking help. Thus, we reach all facets of our community. In addition, we reach the entire parent population of approximately 28,000 homes through a better parenting quarterly newsletter called "Family Connection" sent to parents of children in grades 5 to 12.

Those are just two of our programs. Others include "Just Say No" leader and advisor training, developing capable people parent workshops, safe prom/graduation project, and coordinating the State Red Ribbon and Greenville Red Ribbon Campaigns.

We are convinced that prevention programs must be presented over a significant period of time, with at least a 5-year minimum timeframe. We must have sustaining funds for continuing programs, not just startup funds for 1-year projects. Changing attitudes and behaviors are not measurable in a 1- or 2-year period. Communities begin to buy into and pay for programs that have a successful track record, but we first must be able to show that record in measurable terms. Therefore, in order to show attitude and behavior changes, programs must have long-term funding.

Prevention and community education funding dollars must also increase. Government funds for blimps that can't get off the ground for drug surveillance should be put into prevention efforts. Yes; we have to have a drug interdiction program, and at the same time Government must recognize that communities and families will ultimately make the real difference in turning kids off of drugs. According to national experts, parents are noted as the most influential resource our country has for the prevention of negative lifestyles for youth. They also advise that no one single program will solve the problems, but state that those programs making the greatest impact target parents and youth in education, awareness, and providing alternatives.

Moms and dads traditionally parent the way their parents did—and as society has changed, those methods must change also. The problems our young people face today didn't happen overnight and won't be solved quickly. They are nobody's fault and everybody's responsibility. That responsibility includes taking politics out of this drug war and increasing prevention funds for long-term programs.

PREPARED STATEMENT

Senator HOLLINGS. Very good. We will insert your statement in the record at this point.

[The statement follows:]

STATEMENT OF KAREN ABRAMS

Greenville Families In Action is a community based consortium of parents, educators, religious and business leaders, and other professionals who have since 1984 addressed adolescent use of alcohol and other drug problems in Greenville County. Our approach to these problems focuses on education, awareness, and safe alternatives toward parents, youth, and educators. We believe that the problem can best be addressed by local groups who are working with local populations.

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We are convinced that prevention programs must be presented over a significant period of time, with at least a five year minimum time frame. We must have sustaining funds for continuing programs, not just start-up funds for one year projects. Changing attitudes and behaviors are not measurable in a one to two year period. Communities begin to buy into and pay for programs that have a successful track record, but we must first be able to show that record in measurable terms. Therefore, in order to show attitude and behavior changes, programs must have long-term funding.

Prevention and community education funding dollars must also increase. Government funds for blimps that can't get off the ground for drug surveillance should be put into prevention efforts. Yes, we have to have a drug interdiction program and at the same time government must recognize that communities and families will ultimately make the real difference in turning kids off of drugs. According to national experts, parents are noted as the most influential resource our country has for the prevention of negative life-styles of youth. They also advise that no one single program will solve the problems, but state that those programs making the greatest impact, target parents and youth in education, awareness, and providing alternatives.

Moms and Dads traditionally parent the way their parents did—and as society changes, those methods must change also. The problems our young people face today didn't happen overnight and won't be solved quickly. They are nobody's fault and everybody's responsibility. That responsibility includes taking politics out of the drug war and increasing prevention funds for long-term programs.

LETTER FROM HOWARD S. WADDELL, VICE PRESIDENT, GREENVILLE FAMILIES IN ACTION

FEBRUARY 7, 1990.

ERNEST F. HOLLINGS,
Chairman, Subcommittee on Commerce, Justice, State, the Judiciary, United States Senate, Washington, DC.

DEAR SENATOR HOLLINGS: Greenville Families in Action is a community based consortium of parents, business leaders, and professionals who have since 1984 addressed drug and alcohol problems in Greenville County. Our approach to these problems has focused on prevention and education. We believe that the problem can best be addressed by local groups who are working with local populations. We are convinced that education/prevention must be presented over a significant period of time, preferably five years or longer. We believe that established programs such as ours are more efficient and effective than implementing new programs. We hope funds can be allocated to network between local programs and agencies and that this is an important factor in fighting the drug war.

Attached are several items. First, is an organizational description of GFIA which describes our mission and staff. Second, is a need description for Greenville County. This was conducted in 1988 and strongly supports the programs underway by our group. Third, are descriptions of programs we sponsor, Developing Capable People, "Just Say No" and Safe Prom/Graduation, Family Connections, Resource Center, and Red Ribbon.

We propose to continue these programs and would like to expand and add a major communications component. This addition would provide the community networking function mentioned earlier. The major problem we have in accomplishing these goals is competition for available funds. We propose cooperative efforts among federal, state, and local groups. This would avoid duplication of effort and programs.

We look forward to testifying on this important matter.

HOWARD S. WADDELL.

ORGANIZATION DESCRIPTION: GREENVILLE FAMILIES IN ACTION

ENRICHING AND STRENGTHENING FAMILIES

Greenville Families In Action, Inc. (GFIA) promotes adolescent health and wellness. Founded in 1984 and governed by a Board of Directors, with input from an appointed Community Advisory Council, GFIA works to educate and increase community awareness on the tough issues facing families today. Through a wide range of programs, GFIA has grown to be a multi-faceted organization.

Our mission is to enrich and strengthen the family by developing healthy, capable and responsible youth and adults in Greenville County. The concept of GFIA, to prevent or intervene early in self-destructive behavior of children, takes on several programmatic solutions. Knowing that parents and educators have the most influence with children, we have built a prevention/intervention model through education, training, and awareness.

GFIA networks with schools, both public and private, churches, community centers, housing projects, law enforcement, youth agencies and especially parents to become a significant contributor to the wellness of young people. Issues most significant through our programs are reducing alcohol and other drug use, managing stress and depression, reducing youth suicide, improving communication, self-esteem, motivation, and relationships. Through our various programs GFIA hopes to change attitudes, increase alternatives, and promote positive life skills and lifestyles for Greenville's youth—our future.

THE FACILITY AND STAFF

GFIA located at 615 East McBee Avenue, just east of Church Street in downtown Greenville and two blocks away from Interstate highway 385 makes easy accessibility from all of Greenville County. Additionally, our facilities are on the Greenville Transit Authority route.

The office and Resource Center are open from 9:00 A.M. to 2:00 P.M. Other hours are by appointment.

Staff positions include an executive director, program director and an administrative assistant.

For further information, please contact the office at (803) 235-4099.

NEED DESCRIPTION FOR GREENVILLE FAMILIES IN ACTION, INC.

According to the Needs Assessment Priorities Study of Greenville County (NAPS) 1988, the most significant problems of Greenville County are (1) Undereducation; (2) Substance Abuse; and (3) Family Dysfunction. The report concluded that although education and prevention efforts are well established in Greenville County, they must continue to serve and reach out to greater numbers of persons at risk in these areas of highest need.

The Greenville County crime rate has risen as a direct result of the drug epidemic according to county police and sheriff's departments. Armed robberies increased 31 percent in 1988. Burglaries 22 percent. Violent crime 10.4 percent in the city with an overall increase of the county of 7.9 percent. Greenville County mirrors national trends as well, in that alcohol and drugs are involved in (1) 50 percent of all fatal car crashes; (2) 80 percent of all fire deaths; (3) 69 percent of all drownings; (4) 55 percent of all arrests; (5) 35 percent of all suicides; (6) 60 percent of all child abuse cases; (7) 65 percent of all homicides.

Reducing the demand for alcohol and other drugs is the long term goal of reducing the above statistics. Education programs and alternative activities, including building self-esteem and motivation, will be the long term solution to loss of life and productivity in Greenville County. Nationally, lost productivity in the workplace due to alcohol and other drug abuse is estimated at over $98 billion annually. By developing capable youth, the workplace in the future will have less (1) on the job accidents; (2) sick days and absenteeism; (3) worker's compensation claims and; (4) employees functioning at only about two-thirds of their potential.

All too often parents tend to feel isolated with the job of raising clildren. Far more serious issues face parents today than at any other time in the history of our country. According to various national resources, time and time again parents are noted as the most influential resource our country has for the prevention of alcohol and other drug abuse by adolescents, building self-esteem and producing motivation, management of stress and depression, prevention of teen pregnancy, and intervening in other negative behaviors and life-styles. The primary source of the development of future life-styles and attitudes for children fall in the hands of their parents.

However, today most parents are less equipped to deal with the issues than ever before because of the lack of knowledge, acceptance of many behaviors and denial of severity of the problems. Therefore education of the issues and strategies to deal with them must become essential priorities for the parent population. Many families through economic conditions are two parent working families. The divorce rate, now at an all time high, makes it difficult to devote the time necessary for seeking and attending community events held to help families cope with the adolescent issues. Less extended families living nearby to help has made parenting even more difficult. GFIA seeks to alleviate the family of some of the stresses and invoke knowledgeable and manageable family dynamics able to communicate with clildren and cope with the pressures of today's society.

DEVELOPING CAPABLE PEOPLE TRAINING

Developing Capable People workshops provide family support and skill training in communication. This course, in a series of four to nine training sessions, shows parents, teachers, supervisors, counselors and civic and religious leaders how to help others acquire the perceptions and skills necessary to lead productive and successful lives. The sessions teach the following: Encouragement of self esteem and confidence building in yourself and others; building on successes and learning from failures; encouraging others to be responsible for their actions; reducing conflicts; improving management, discipline, comprehension, and incentive for achievement; communicating in a style based on openness, honesty, respect, and love; and strengthening relationships and the family.

Workshop leaders dramatically demonstrate that through positive life skills learned in this course participants can begin to: Reduce destructive alienation in relationships; reduce declining school achievement; reduce declining productivity; reduce problems in the workplace; reduce alcoholism and other drug use; reduce violent crime and vandalism; and reduce suicide, teen pregnancy, and other social ills prevalent today.

Requests have been made to make these workshops available for low socioeconomic populations, teen parents, work release centers, and vocational rehabilitation programs, as well as for the general public through schools and churches.

ALTERNATIVES—"JUST SAY NO" AND SAFE PROM/GRADUATION

"Just Say No" continues to be a growing movement of activity for elementary and middle school aged youth to join a club with their peers, learn about the harmful effects of drug use, obtain peer reversal skills, organize alternative activities and have fun without alcohol or other drugs. There are currently 58 clubs registered with the GFIA office in Greenville County. The highlight of the year is the annual "Just Say No" Walk and Rally led by the sponsorship of GFIA.

Workshops for leader training are sponsored by GFIA each year as new leaders take over clubs at the beginning of every school year. The Annual Walk and Rally (three annual events to date have seen over 1,500 children each year marching and shouting "Just Say No" cheers and chants) is now a scheduled event on Greenville's calendar. Participation is heavy by children and research concludes that as often as a child can make a public commitment to say no to drugs, he/she is more likely to say no for many years to come. Saying "No" also includes other skills to deal with unacceptable negative behaviors such as sex, truancy, shoplifting, gossip, vandalism etc.

Safe prom/graduation round-table workshops are held annually to promote "After Prom and Graduation" events. Area high school representatives made up of administrators, faculty, students and parents from private and public schools meet to plan and share ideas for providing alternatives to harmful behaviors on the high risk evenings of prom and graduation. In addition letters are sent every Spring to restaurants and hotels in the area encouraging careful scrutiny when serving minors.

GFIA intends to develop a manual indicative of our community to help the various volunteers recruited to plan and implement "After Parties" throughout the county. Also a study will be made as to the potential for GFIA to sponsor "After Parties for Graduation" on a county-wide basis. This will be modeled after the successful Florida, Maine, and Tennessee Safe Prom-Graduation Project.

FAMILY CONNECTIONS

Family Connections newsletter is a quarterly parenting newsletter published and distributed to all parents in Greenville County with children in grades 5–12 (numbering approximately 27,000 households) in all public schools and most private schools. Some of the contents featured in the publication are: parenting skills, step-parenting, children and divorce, signs and symptoms of adolescent drug use, creative family activities, self-esteem and motivation, dropout prevention, teen pregnancy, various training opportunities, book and videotape reviews, and other resources available to support family life and health. Articles are written by local, state and national professionals as well as students.

GFIA feels the newsletter is especially making an impact in homes of children whose parents, because of single parent families and two working parent families, find themselves unable to attend PTA meetings, local conferences, workshops, seminars, etc. by increasing the dialog and discussion of the issues in the family and providing local resources whereby they may find help. GFIA would like to expand the readership to include grades three and four and to add a community "bulletin board", a clearinghouse for all notices of related events sponsored by health care providers and agencies.

In our third year of publication, Family Connections newsletter has linked families with our Resource Center of print and audio visual materials, parenting workshops, and other community resources through referrals. This outreach project is free to parents thereby helping to reach thousands of disadvantaged families also. It has, in addition, helped youth who have called our office seeking help to be referred to resources within their area. Other benefits for the community are that several articles have been reprinted in school newsletters, church publications, and business publications. Invitations to speak to civic, religious, and other community groups about adolescent issues and parenting have grown also. Parents now look forward to receiving Family Connections each quarter and have written or remarked that it is always saved to refer back to in the future.

Although there is no one single project/program that will be the solution to developing capable youth. GFIA believes strongly that parent education is a vital means to that end. Family Connections is breaking down barriers of families feeling isolated with their problems and dilemmas in raising self reliant children. They are seeking help where before denial of problems was at an all time high. Attitudes among young people towards healthier lifestyles will improve with continued parent education and involvement.

GOAL

The goal of Family Connections is to increase education, dialog and awareness among parents, youth and educators on adolescent health and social issues in order to help youth achieve positive life skills and lifestyles for adulthood.

OBJECTIVES

Family Connections concept objective is to approach the issues on a positive level by offering "better parenting skills", knowledge of the issues and support from being isolated in order for parents to be the catalyst in developing capable youth.

To bring information to many fragmented families such as single parents, two parent working families, low income families and those with less support of extended families who may or may not be able to attend parenting functions such as PTA meetings, workshops, seminars, etc.

Publish on a quarterly basis an eight page newsletter to be distributed free of charge to all parents of children in grades 5–12 in public and private schools in Greenville County. (Approximately 27,000 to 28,000 homes.)

To serve as a networking tool for timely announcements of related seminars, workshops, and community resources concerning youth.

Editorial committee's responsibilities include planning, writing, soliciting local and national authors, editing, working with printers and distribution of newsletter. The chairman shall be a member of GFIA's Board of Directors. Volunteers drawn to serve on this committee include PTA representatives, school district representatives, and professionals in the community.

Continue District I PTA cooperation in furnishing mailing labels and providing volunteers for Editorial Committee.

Continue cooperation with Greenville County School District Fine Arts Center to provide cover art relating to theme of each issue.

Secure funding for publication on a quarterly basis. Credits will be given on newsletter masthead as such: "Published by Greenville Families in Action, Inc. in Cooperation with District I PTA of Greenville County.

RESOURCE CENTER

The purpose of the Resource Center is to provide continuous, up-to-date information through various print and audiovisual materials. The materials, which are available to anyone free of charge, cover the spectrum of topics facing youth and adults today. These subjects include alcohol and drug abuse, stress, depression and suicide, parenting skills, teen pregnancy, sex education, AIDS, eating disorders, divorce, stepfamilies, improving decision making skills, building self-esteem, motivation, and family and interpersonal relationships, positive peer pressure, and improving communication skills.

Materials are selected through the Resource Center Committee of GFIA. Persons asked to serve on the committee include those with a medical background, school district personnel, parents, and other professionals. Criteria for a resource to be accepted/purchased includes: (1) be medically accurate; (2) be medically adequate; (3) be legally accurate; (4) be age appropriate; and (5) contain a strong anti-use message.

GFIA believes in a multi-faceted approach to prevention, combining awareness with education and training to change trends. Targeting the root causes of negative behaviors of young people before they are in trouble will change these trends of alcohol and other drug abuse as well as the rate of suicide among youth and young adults, child abuse, teen pregnancy, drop-outs and crime. The root causes, poor self-esteem, unclear values, lack of decision-making and coping skills, inability to set and reach short and long-term goals, lack of positive role models, lack of real world success experiences, no clearly defined belief systems, lack of support systems, and emphasis on accumulation of things . . . with a de-emphasis on healthy, interpersonal relationships, are all addressed in the philosophy and programs of GFIA and especially in the materials selected for the Resource Center and in training of parents and professionals.

GOALS

Provide a non-partisan community clearinghouse for the education and awareness of adolescent health and social issues with up-to-date information for parents, youth and others having a decisive influence on youth.

Educate those in the community of adolescent health and social issues to prevent the growing prevalence of health problems found now and later in life among our youth.

Provide PTA, parent groups, community and civic organizations with materials suitable for group education programs and educational/awareness materials to at risk and high risk populations of Greenville County.

Promote parent peer groups in elementary, middle and high schools, neighborhoods and community centers.

Provide easy access to education and awareness messages.

OBJECTIVES

Hire a Resource Center Manager for 20 hour work week, hours of 1:00 P.M. to 5:00 P.M. At present, Center is open 9:00 A.M. to 2:00 P.M. with project staffing of three persons at 20 to 25 hours each per week. To accommodate teachers and others who need access to the center in the late afternoon hours the hiring of this manager will allow the center to be open from 9:00 A.M. to 5:00 P.M.

Complete comprehensive Bibliography of Resource Center and distribute to the community, i.e., public and private schools, community center staff, hospital education units, "Just Say No" Club leaders, churches and parent groups.

Establish "mini-centers" in targeted neighborhoods where transportation and mobility of residents is a problem and areas where high risk populations frequent on a regular basis. These "mini-centers" would consist of utilizing a small space in an existing neighborhood social center, community center, meeting room, etc. with pamphlet rack and/or shelving unit to hold education and prevention print materials and posters targeted to these high risk neighborhoods and/or clientele. Expansion of the center would entail reaching out to populations not now using the center on a regular basis, those populations having transportation problems and other barriers preventing them from seeking help. Also to provide additional educational resources in the center, especially targeted to at-risk populations.

Develop a GFIA "Rsource Center" brochure for inclusion in the mini-centers targeted to the high risk population. This is needed to breakdown barriers for using the main center housed on McBee Ave.

Continue pamphlet, book, film and video review process for purchase of new materials for the Center.

Provide parent education packets.

Study implementation of computerized message system for awareness, education and intervention of health issues.

COMMUNITY AWARENESS—RED RIBBON—AND THE FUTURE

THE RED RIBBON CAMPAIGN

In changing attitudes, mores and social thinking, community awareness must occur. For the past two years GFIA has sponsored the "Red Ribbon Campaign" to heighten community awareness. This project is a year long comprehensive campaign designed to be a catalyst for communities toward the beginning of a drug-free decade. As part of a national campaign sponsored by the National Federation of Parents for Drug-Free Youth (NFP), Greenville has become a leader in the nation with community awareness taking place the last week in October. We are pleased to have a volunteer now serving on the national planning committee. But more important, the awareness to change attitudes and shift peer pressure is beginning to happen. It is GFIA's goal to have nearly 100 percent of the population wearing red lapel ribbons to show their support of a drug-free Greenville each year. GFIA's leadership in this campaign can enhance programs now in place or spark the beginning of new program efforts for drug abuse prevention in schools and the workplace. With this community awareness Greenville will finally become intolerant of drugs on our streets, in our schools and threatening all of our families.

THE FUTURE

As with any organization, growth and additional methods to achieve the mission statement are ever present on the minds of Greenville Families In Action. With this in mind GFIA has several on the drawing board. Brief descriptions are included for your review below.

PEER FACILITATOR/COUNSELING

An increasing number of teens consider drug abuse the largest problem facing their generation. Statistics confirm that drug and alcohol-related problems are the leading cause of death among adolescents and young adults. The tragedy is that, while young people often freely turn to one special person—a friend most often, teacher, or parent—for help in dealing with social pressures, few individuals have the skills or knowledge to teach adolescents to cope successfully with personal and peer group conflicts. Positive peer counseling can and does fill this void.

Peers having a greater influence over their own peers in negating undesirable behaviors leads us to this project. After sponsoring one successful leadership training in 1987, GFIA now intends to sponsor two separate trainings (middle school and high school) for faculty, administrators, and parents to train their school populations in the peer helping model. In addition, a newsletter linking peer facilitators within the county will be developed to help reinforce the skills of the peer helper and inform them further of other "helping community resources." Additional resources will be purchased and housed in the Resource Center. Long range goals include sponsoring student trainings in a separate setting to help the schools achieve a core "peer helping" referral base.

TRAINING

Through the video based "You've Got To Be Kid-Ding!" training program, teachers, other professionals and parents may obtain additional skills of working with youth. GFIA is seeking volunteer facilitators for this program. The School District of Greenville County has approved it for in-service training of faculty and staff.

ALTERNATIVES

Developing family events and alternatives for youth are priorities as is educational training. As new national materials are developed and tested, so will Greenville Families In Action continue to expand to further our mission of developing healthy, capable and responsible youth and adults.

STATEMENT OF CHERYL FUNDERBURK, DIRECTOR OF PREVENTION SERVICES, PICKENS COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE

Senator **HOLLINGS**. Ms. Funderburk.

Ms. **FUNDERBURK**. Good afternoon, Senator Hollings. Cheryl Funderburk with the Pickens County Commission on Alcohol and Drug Abuse. In my work for the last 6 years or so, I've worked with three colleges: Central Wesleyan College, Tri-County Technical College, and Clemson University. And what I say is a compilation of my experiences there, plus my reading, so I'm not targeting any one institution as having a problem more than any other. From a conversation I had today, I would say the problem here in South Carolina is as bad as the problem in Oregon, from a colleague who has just been there.

For many college students, it seems that college itself is seen not as an educational opportunity, but as a 4-year camp, is the way one student worded it for me; and that one of the purposes of the college experience itself is the opportunity to party, not to learn. And in dealing with students, what to party means is to get drunk. They do not drink just to taste alcohol or to have something to drink to quench a thirst; they are actually drinking in order to get intoxicated, more often than not.

Getting drunk and playing drinking games, those are two notions that are firmly entrenched in college life. I hate to bring this up after you've brought up such a good point in the Greenville Piedmont, but in a newspaper that comes out for college students, called "U, University, the National College Newspaper," its editors claim that they hope to enhance the quality of campus life. This article, I didn't include this, and I would like to give you a copy of it, and I'm going to read it real briefly:

> Beer Swiggers' Bible is a Must for College Life. "The Complete Book of Beer Drinking Games" by Andy Griscom, Ben Rand, and Scott Johnson is the best collec-

tion of recreational drinking rules around. Best of all, it comes with a custom barf bag.

This Beer Swiggers' Bible contains all the usual games near and dear to every college student's heart: Quarters, boat racing, and beer softball. The games are ranked according to the amounts of alcohol consumed.

I'll have to translate here a little bit: A boot factor, boot means to throw up.

A boot factor of 1 describes the lowest potential for tossing cookies—again, to throw up—while a boot factor of 5 warns of an almost assured heave.

One boot factor 5 game, boot about, is brilliant for its simplicity, and deadly for players. This game was custom made for any gnarly drinking joint. A pitcher of beer is passed around the group, each player drinking as much as he desires. The beauty is the game's only rule: The player who drank just before the player who finishes the pitcher must buy the next pitcher. Before you think that this sounds boring, consider the amount of beer you would be willing to drink to ensure that the person before you has to purchase the next round.

"The Complete Book of Beer Drinking Games" is a worthwhile investment for anyone who believes that the sole purpose of college is to drink and have fun.

So, while some good things are happening, some negative things—and this is in the February issue of that particular publication.

Some statistics to consider: 4.2 percent of our college students use cocaine; 16.8 percent smoke marijuana, and 77 percent drink alcohol. Those are national figures; but my own experience, I've dealt with—I just looked at some records —14 students who in the course of 4 weeks drank 1,518 drinks, which averages out, I think, to a little over 100 drinks per person during that 4-week time period, which is a lot of alcohol.

We also note that vandalism, general arrests, date rapes, discipline arrests on campus, are all closely linked to alcohol; so there definitely is a problem on campuses, but there are also some good things that are happening. It sounds real negative, but I don't think it's completely bad.

Some of the things that are being done are policy formation. It's usually an ongoing thing with schools, constantly evaluating what their policy says. I've just been embroiled—it's been in the newspaper a lot, and on the air—with Clemson University, as they have evaluated their alcohol policy. And what we usually try to do is incorporate a lot of the laws, make sure they are clearly spelled out, State and local laws; plus, we would look at any unique situations particular to a campus in addressing regulations.

It also includes, usually, party definition, going back to the fact that most students only use the word party when they mean alcohol. We're trying to change that, where party can mean a function where alcohol is not present. And also party management. Most liability cases on a college campus deal with mismanagement of alcohol at a party. Food is usually something that is required at most parties on campus now; plus people who serve as identification carders, people who will serve alcohol, people who will act as designated drivers; hosts or the officers of an organization must be in attendance at these parties.

Policy usually focuses on individual responsibility; and, finally, you're seeing focusing on faculty and staff behavior. That's one issue that colleges tend to ignore, and just say it's a college student problem, not a college problem in general. But policies are finally addressing faculty and staff.

In the academic realm, which is what, technically, students are there for, there are some things happening there. As I heard mentioned earlier, several of our colleges do offer classes, both undergraduate and graduate level, on alcohol and drug abuse. Other classes will bring in guest speakers, where the class itself may not focus on that issue, but if it's appropriate they bring someone in to talk.

One thing we're looking at right now is encouraging faculty to have Friday tests. That requires you to study, usually, on a Thursday night. And when you're in college, the weekend does not wait until Friday to begin, but also begins on Thursday, and sometimes as early as Wednesday. So we think if there were Friday tests, the students might not be going out as often on Thursday night.

A lot of education and training goes on. In the housing life on campus, you usually have your residential assistants trained to recognize problems, and also how to do programming in the hall. Social organizations and student professional clubs need to get educated on a lot of the issues surrounding alcohol and drug abuse. National Collegiate Alcohol Awareness Week, this coming fall will be No. 7 for it. National Collegiate Drug Awareness Week, which begins in about a month, will be the third one nationwide. Athletes are another group that is receiving special education and information about alcohol and drug abuse. They tend to have such a fish bowl life for themselves that special attention does need to be given to them.

Intervention and treatment are two other areas that have to be addressed and are currently being addressed on our college campuses. One thing that I do in my work at Clemson University is to work with the students who are involved in alcohol-related discipline. It does tend to be alcohol and not drug related. And as a component of that we usually get them to start doing what we call critical thinking, examining a decision on a lot of different levels before making it. Looking at their leisure options: What you frequently hear is, there is nothing to do but drink, so we try to help them realize what their other options are. Time management and stress management: They tend to be poor managers of their time, and so they use that as an excuse when they have a really rough week because they had to stay up every night late and study, that when Friday gets here they go and blow it out and get drunk; so we look at time management and stress management. Counseling is something that has got to be addressed on a college campus, sometimes not necessarily with an individual's drinking, but with what is going on at home. So children of alcoholic issues is something that needs to be addressed.

Some of the fun things that are done on college campuses are the different social options that we make available. Just to rattle off a few, at Clemson we've had Oozeball, which is volleyball in the mud; and we entitled that "Ooze, Don't Booze." Another one is "Don't Tie One On, Tie Dye." Tie dye, as I'm sure you've probably noticed, is popular with all age groups; and they think that the sixties never existed, as far as tie dying, but that they invented it themselves. But we've had many tie dye parties where students come out and dye tee shirts to sheets. One of the residence halls at Clemson has been really original and has sponsored—this year will be the third or fourth annual one—"Spike a Volleyball, Not a Drink" all-day bash for themselves. And then other areas, I've heard of going on murder or mystery parties, theme parties where you're going to have a lot of fun.

Looking at the future, I've heard a lot of comments on money, and that can't probably be overstressed. In my role at the agency, I know how much money is given to drug-free schools. When it comes to college drug-free school money, we have to compete for it on a grant competition, so out of the 3,300 schools nationwide, only one-tenth have received any Federal funding out of the drug-free school money. So there definitely needs to be some more money.

Most schools—I say most—I'd say maybe one-half have somebody on staff full time to address alcohol and drug issues. Others might have somebody who does a zillion other job duties, and they throw alcohol and drugs in on top of that. There needs to be more emphasis on student involvement in providing prevention and education activities. I'm almost at the age now, unfortunately, where they're not going to listen to me anymore, either. They do listen to their peers more than they listen to someone older.

With that in mind, South Carolina, this year, with their South Carolina school and alcohol and drug studies, have a special college track where students and administrators will get together and decide how to get students involved in doing prevention programming on the college level.

Faculty and staff cannot be overlooked as role models and mentors. We frequently go to them for advice about academics, and even our personal life; and I think they need the educator to note, "you know, so-and-so has been out of class every Friday. Why?" So they can also do some intervention there.

Students need to have the opportunity and the encouragement to get involved in extracurricular activities so they're not sitting around going to class 15 hours a week, and that leaves you with 140 some odd hours a week to blow. They will do that if they don't have anything else to do.

Critical thinking, again, needs to be a part of every academic and developmental curriculum. They need to learn how to think. A lot of people just don't do that. They go in and they learn how to do a job, and then they get out and start doing it, but they have never really learned how to think.

Through alcohol and drug professionals, college administrators, and college students, this last decade of the 20th century has the potential to see positive steps made on the college and university campus. The opportunity is there, but colleges and universities have to be willing to take it. Thank you.

PREPARED STATEMENT

Senator HOLLINGS. Thank you very much. We will insert your statement in the record at this point.

[The statement follows:]

STATEMENT OF CHERYL FUNDERBURK

When asked about the alcohol and drug situation on the college or university campus, my usual response is that there is both good news and bad news.

The bad news is that: Approximately 20 percent of college and university students have used some illicit drug in the last 30 days; almost 5 percent of our college and university students are daily drinkers; heavy drinkers constitute 43 percent of the college and university student population; every semester there are numerous college and university student deaths related to alcohol or drug abuse; four out of ten colleges and universities are involved in some form of litigation, either directly or indirectly related to alcohol and drug abuse; colleges and universities estimate that 75–80 percent of their discipline cases and vandalism damages are connected to alcohol and drug abuse; date rape on the college or university campus almost always involves alcohol; while less than 30 percent of college and university students are of the legal drinking age, 77 percent of college students consume alcohol; the 20–24 year old age group accounts for the highest number of alcohol related traffic fatalities; award settlements resulting from alcohol related civil lawsuits against student organizations and individual students range anywhere from $250,000 to $21 million; weekend admissions to campus health facilities are usually alcohol or drug related.

While the picture may sound gloomy, there are some positive changes taking place on our campuses. The good news is that: Ten years ago the number of students using illicit drugs was twice as high as it is today; approximately 67 percent of our colleges and universities identify and refer individuals with drinking problems to an appropriate treatment facility; 1989 saw the sixth celebration of National Collegiate Alcohol Awareness Week with over 3,000 colleges and universities taking part in sponsoring campus activities; 1989 also saw the second commemoration of National Collegiate Drug Awareness Week, indicating the realization that drugs are an issue on campus; the Network of Colleges and Universities Committed to the Elimination of Drug and Alcohol Abuse was formed in 1989 to provide its member institutions with information on quality programs and effective strategies for coping with problems of alcohol and other drug abuse; BACCHUS (Boost Alcohol Consciousness Concerning the Health of University Students), founded at the University of Florida in 1976, has grown to include over 340 chapters in the United States; more efforts are being directed to provide viable alcohol/drug-free social events on campus; fraternity rush, the venerable college drinking occasion, has gone virtually "dry;" many colleges and universities are involving students to serve as peer educators, peer counselors, and role models in the war against alcohol and drugs; some colleges and universities offer students the option of living in an alcohol-free residence facility; double standards for students and faculty are finally being addressed through policy and education.

Without a doubt, great strides have been taken in the past twenty years to fight the problems of alcohol and drug abuse on the college campus. Higher education programs now involve the entire continuum of services: education, prevention, intervention, and treatment.

One of the initial areas addressed by colleges and universities was the alcohol policy. Evaluation of policy tends to be an on-going occurrence. Recently, there has been an emphasis on including faculty and staff events and behavior under the same policy which governs student life. Liability and personal development are the motivators behind most policies.

Most colleges and universities offer academic courses which focus on alcohol and drug abuse. These classes are often housed within education, psychology, sociology, and nursing departments. Classes which include discussion on various specific alcohol and drug topics are also found in freshman introductory courses (the problems of high risk drinking, drugging, and sex), business courses (the economics of alcohol abuse, the cost of drug trafficking), management courses (the usefulness of Employee Assistance Programs, supervision and alcohol and drug abuse, drug testing), and other appropriate courses.

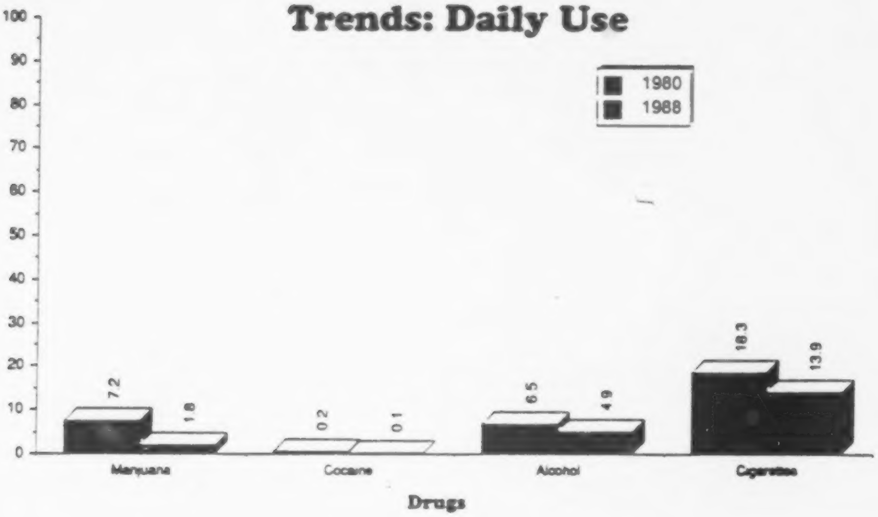
In addition to the academic training of students, there are vast numbers of programs geared to college and university students which give them the opportunity to learn about alcohol and drugs. Residence halls are a major source of college programming. During National Collegiate Alcohol Awareness Week, resident assistants (RA's), who themselves received training earlier in the year, take this special week to show films and videos, bring in speakers (recovering alcoholics and drug addicts, treatment staff, law officers), and host discussion groups to address their residents about substance abuse. Bartender training and social host training is an aspect of college life which educates students about individual and organizational liability, how to be a good host, the reasoning behind the requirement of alcohol-free beverages and food, the dangers of drinking and driving, and other pertinent topics. Athletes are another group of students who are targeted with special educational presentations. The pressure on them sometimes leads them to experience with alcohol and drugs in an attempt to relieve the stress of competition and performance. In addition to the general student population, special efforts are geared toward the fraternity and sorority organizations, a system which has traditionally been riddled with alcohol and drug problems.

With the high correlation between alcohol and drug abuse and discipline problems on campus, it is not surprising the number of colleges and universities which require students who violate state and local laws and college and university regulations to participate in some type of student assistance program. Requirements range from one night education-only programs (covering laws and regulations, symptoms of abuse, basic alcohol and drug information, and low risk alcohol choices) to extended programs lasting for four to eight weeks and allow students to examine their drinking habits and urge them to make any necessary changes. Students who are involved in subsequent incidences are frequently required to seek out counseling help, including the involvement with Alcoholics Anonymous or Narcotics Anonymous. Some students, usually voluntarily, get involved with Adult Children of Alcoholics support groups.

One of the programming goals of many colleges and universities is to provide an environment which promotes alcohol/drug-free social options. In their attempts to compete with the high-tech and slick marketing tools of the alcohol industry, alcohol programs have had to be creative. Hence, it is not unusual to hear the following types of slogans: Ooze, Don't Booze; Don't Tie One On, Tie Dye; Spike a Volleyball, Not a Drink; the P.A.W.S. That Refreshes (Promoting Awareness With Students).

These slogans all make reference to alcohol/drug-free entertainment options. The "ooze" in Ooze, Don't Booze refers to the mud used to play mud volleyball. Tie dying made a resurgence on campus (they think they invented it) and colleges capitalized on it. With the emphasis on staying healthy and fit, many programs have a wellness twist. And many colleges and universities know that the most successful programs are those which students are willing to endorse. To get this endorsement, students must be involved in the planning and implementing of ideas and programs.

While much has happened in the decade of the eighties, many more things need to take place in the nineties. Colleges and universities must continue to make every effort to reach the entire campus community, from the incoming freshman to the president emeritus. Involvement with the local community must include churches, civic groups, merchants, realty agents, law enforcement offices, and other appropriate groups. To be truly successful, students must be involved in the planning and implementing of any alcohol and drug campus program and sufficient funding must be made available. Programming can be successful also by using the idea of getting students involved in volunteer programs which are not necessarily related to alcohol and drugs, by fostering the notion that students attend college to get an education not to party, and by making critical thinking an integral part of every academic and developmental curriculum.


Trends: Daily Use
1980
1988
100
90
80
70
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10
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7.2
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6.5
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18.3
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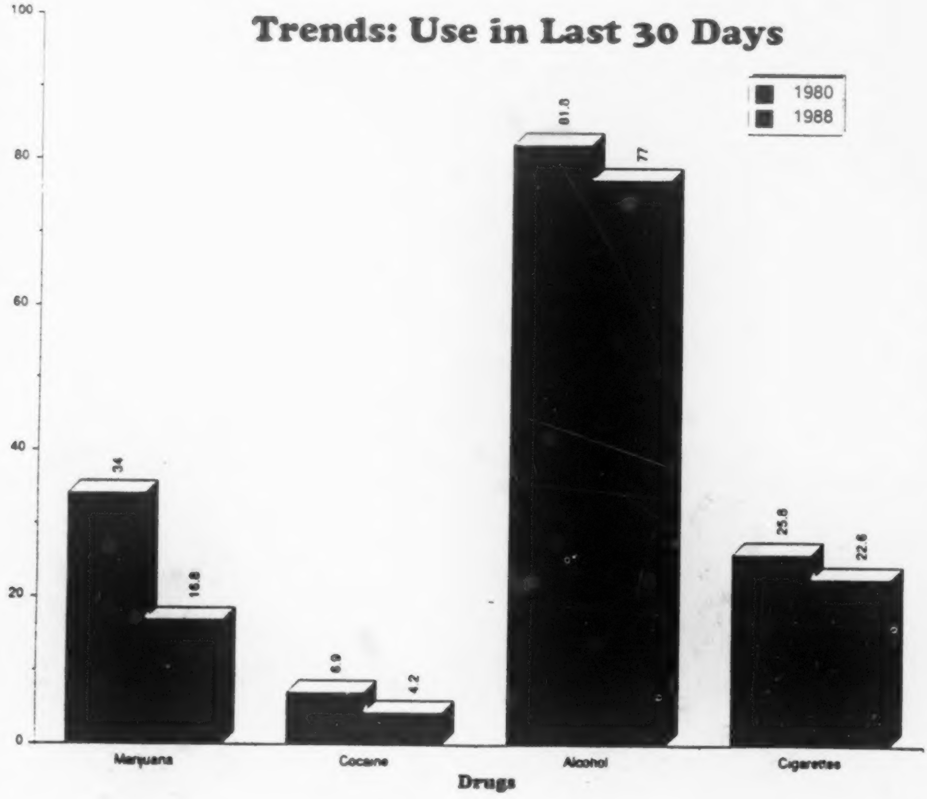
Marijuana
Cocaine
Alcohol
Cigarettes
Drugs


Trends: Use in Last 30 Days
1980
1988
100
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20
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34
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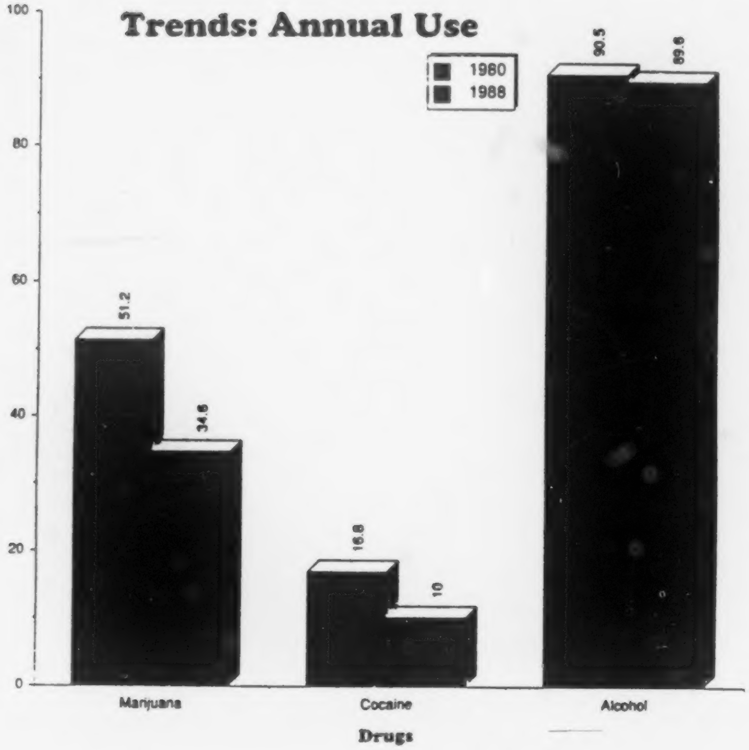
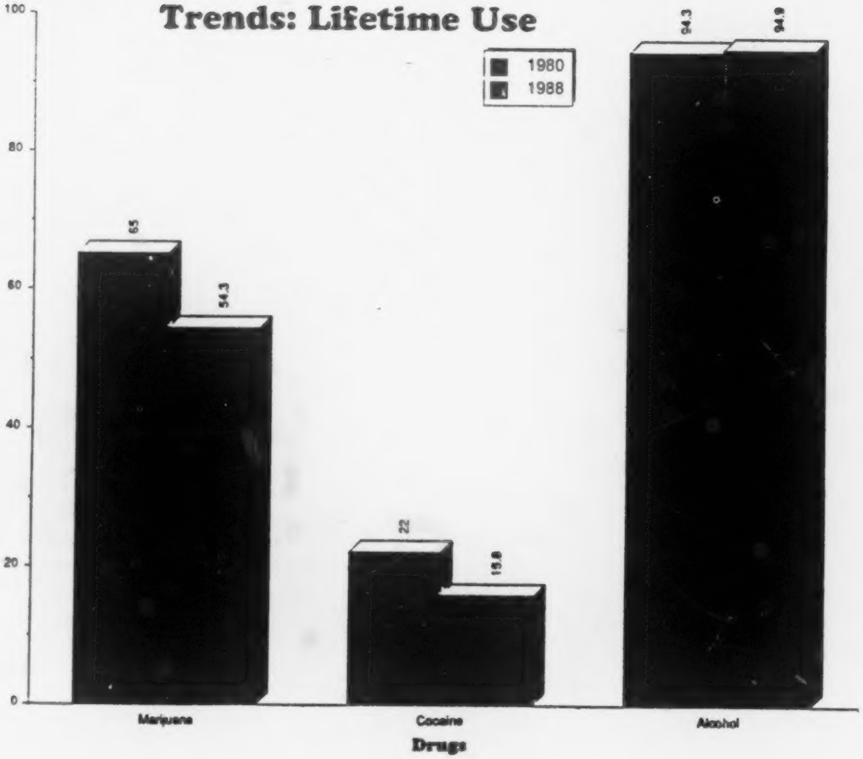
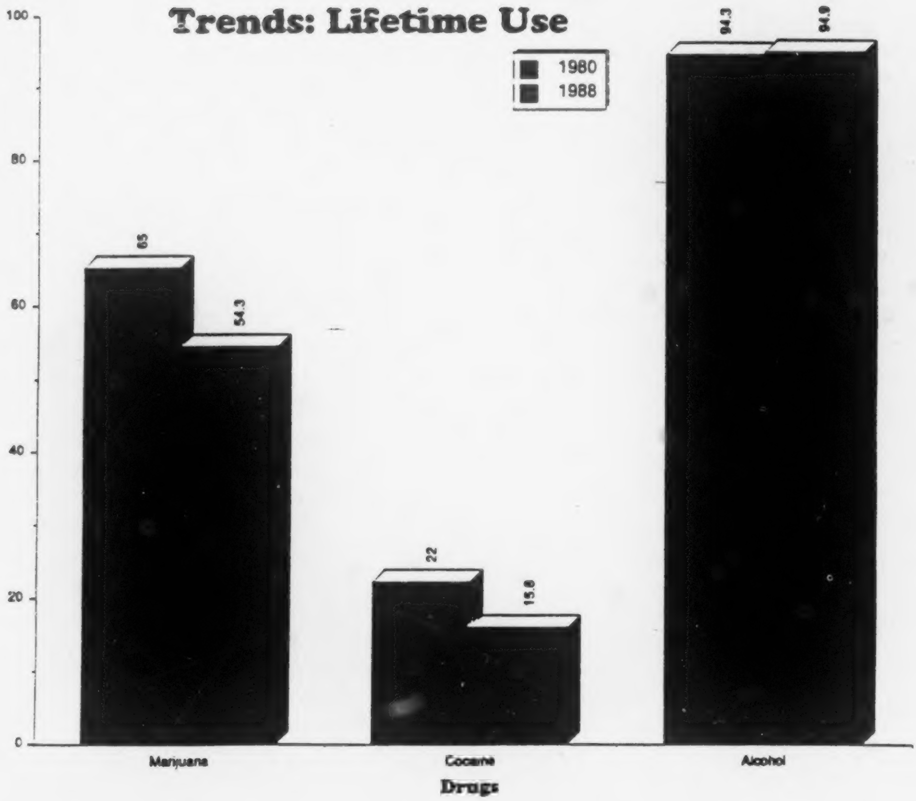
6.9
4.2
81.8
77
25.8
22.6
Marijuana
Cocaine
Alcohol
Cigarettes
Drugs


Trends: Annual Use
1980
1988
100
80
60
40
20
0
51.2
34.6
16.8
10
90.5
89.6
Marijuana
Cocaine
Alcohol
Drugs


Trends: Lifetime Use
1980
1988
100
80
60
40
20
0
65
54.3
22
15.8
94.3
94.9
Marijuana
Cocaine
Alcohol
Drugs



STATEMENT OF JULIANNE BARTOS, STUDENT, FURMAN UNIVERSITY

Senator HOLLINGS. Ms. Bartos.

Ms. BARTOS. Senator Hollings, I'm very pleased to be here today. Cheryl is correct in pointing out many of the problems that colleges and universities are facing; however, I'd like to also point out that these are trying times for my university, Furman University, and many other colleges throughout the Nation. This problem with substance abuse used to be thought of as a passing phase, but now drug and alcohol abuse are national problems of catastrophic proportions. Unfortunately, for most colleges and universities, identifying solutions is a great deal harder than identifying those problems; and Furman University, I will admit, is no exception to these rules.

I speak before you today as a student who is deeply concerned about the problems of substance abuse facing the student body of Furman University and other students at universities throughout America. There is not an easy term for this problem, nor is there a solutions manual that college administrators can follow.

Universities today seem to be caught in a catch 22 situation. On one hand universities must emphasize academics and the value of professional skills, while on the other, universities are responsible for graduating conscientious young adults well versed in their responsibilities to their communities, to others, and to themselves.

I would agree that Cheryl is correct, in that most high school graduates refer to college as, maybe, partying oriented. However, I think that the college opportunity, for most, is considered a place where they can exercise their power to make life's decisions; because, coming from the viewpoint of a student at Furman University, there are not many students that entered Furman University to simply party.

The college environment, I believe, is what is responsible for that partying orientation, and I believe all of you will agree that policy changes and different university regulations, our administration has seen, are really not the answer. For, as many of you are aware, Furman has a no alcohol on campus policy, and yet we have the same problems that many other State-owned universities have. And so I believe that sometimes policies and university regulation requirements and changes sometimes just don't work.

I respect the fact that my university has striven to remain proactive and not reactive. In the past, substance abuse has been addressed through our chaplain's office through programming the "Religion and Life Lecture Series" and through personal counseling for students and codependents. More recently, the student affairs office has targeted groups like our fraternities and sororities to participate in wellness week, which focused on substance abuse as a health issue; and has since instituted an alcohol committee to effectively deal with those problems faced by the many campus organizations.

On this foundation we, the students, have designed a program which integrates many of these same ideas, yet also involves and focuses upon our entire student body. And I will make you all aware that this program that we, the students, have designed is not costing our university 1 cent. This program is designed to be student initiated, student developed, and student sponsored. Since it is still due to occur in March 1990, I cannot quite pronounce success; but through the generous support of caring faculty members and administrators, this program has already received tremendous response.

Broad topical programming and guest lecturers, as well as wide campus organizational involvement, make this awareness week extremely unique. We will have representatives from Federal, State, and local government on campus throughout the week, as well as members of counseling services and rehabilitation organizations.

Many of the individuals that are participating in this hearing are also going to be involved in the substance abuse awareness week now being sponsored at Furman University. They will have the opportunity not only to make major presentations, but to meet informally with student groups for a more personal, direct interaction; and will even participate in classes. For the students, it is far more than the traditional listen and learn program. They will have many opportunities to question, discuss, even to challenge each speaker.

We expect the results to be not only an excellent educational experience, but a chance for students to learn about the personal, social, and political battles of those who fight against substance abuse in South Carolina on a daily basis. Because I'm sure many of you don't know Senator Hollings' daily activities, as far as the drug war in South Carolina goes; and he has been committed to our communities and our State, and yet these students would like the opportunity to hear from State and local leaders what they are doing—like many of you, what you are doing against the drug program. And these students also have not only the desire to learn from your experience, but the desire to know what they can do when they enter the world as a responsible, caring adult and citizen of the community of which you all are already a part.

These role models in Government and the community will get a chance to not only see what the students know and don't know about substance abuse, but they will also get the idea of student commitment in fighting this problem, because many of you may not be aware of what students are doing now and how committed they are to fighting this problem and working with the community to help solve the drug problem on the local level.

The project has received excellent response throughout the Furman community; because it is designed by the students and for the students, we think it will have additional impact. I believe this program could definitely be a model for other colleges because it has the potential to achieve prevention through education and because it helps students take an active, direct role in their education; because many of these speakers are State, local, and judicial leaders in this State, and they will be coming to Furman to speak more on a role model basis. The student organizations which are sponsoring these speakers have an opportunity to take them through their typical day. They have the opportunity to take these speakers not only to their class, but maybe to meet with their organization, to talk with them on a 1-on-1 basis, to have more direct student interaction; and then they get to go out to dinner with these speakers; and then they take them to their campus presentation, which I think is going to be very effective. And then afterward, these organizations have an opportunity to give the campus a reception for the speakers and have all of the students involved in coming and being able to speak with these people on a 1-to-1 basis.

Our university is developing tomorrow's leaders, and tomorrow's leaders have the responsibility to themselves and to their communities to promote a drug-free future for the many generations to follow. So I would like to point out that drug-free programs shouldn't stop at the high school level. They should go on and continue throughout the university. Thank you.

Senator HOLLINGS. Thank you very much, Ms. Bartos.

As you know, you were kind enough to invite me to participate in Substance Abuse Awareness Week, but, unfortunately I have a prior commitment and cannot attend. Let me say that I believe you're on the right track in getting the students actively involved in substance abuse prevention programs.

DRUG EDUCATION IN GREENVILLE

Now I'm going to start with Dr. Greene, because until I heard Ms. Funderburk I was wondering where all the drugs were coming from; you had a total litany, there, of all the work being done in drug education in Greenville County. It's taking a long time to take effect, evidently, isn't it?

Dr. **Greene**. It sure does.

Senator **Hollings**. How long have these programs been going on in the Greenville schools?

Dr. **Greene**. The program, "Here's Looking at You, Two," which is a comprehensive curriculum program starting in the fall of 1983——

Senator **Hollings**. So it's been ongoing, there, in the order of the last 5 or 6 years?

Dr. **Greene**. Strong. But it's expensive. The materials are expensive, the training of the teachers. We've probably trained about 200 each year. We have 3,200 teachers; so, you see, we are about one-third of the way through. That's good, but it's not enough.

Senator **Hollings**. How do you measure your results? How would you measure them at this point? It's difficult, I guess, to measure them.

Dr. **Greene**. It's very difficult. One way you could measure would be the number of students who are referred for possession or use of drugs. But I personally believe that we only catch the few inexperienced ones who are just starting and get caught. Those who have been doing it are smart; they are very difficult to catch, whether they're selling it or whether they're using it. It's really very hard to measure that kind of success. We can only, I guess, look at the number of people who participate in the programs and the number of people who are actually caught.

Senator **Hollings**. Greenville has always been a bellwether. I saw Dr. Kerns at the lunch break, and I was asking about old Dr. Pete Hollis, where we almost caused a political end to all of us, merging 101 school districts into 1. Now you're leading the way on these important drug education programs, and I commend you for it.

DEMAND REDUCTION

But I've been listening all morning, how we're really failing in our assault on drugs; and then to listen to you in the afternoon, I'm saying to myself, "Well, wait a minute. With all of that going on, how could they have the magnitude of problems described by the solicitors, sheriffs, and chiefs of police?" Yet, we really are behind the curve, and it's going to take, in your opinion, another generation, or about 15 years to see a real reduction in drug use. Like we've taught everyone to stop smoking—I don't see anybody smoking around here—we need to teach people to stay away from drugs and alcohol, too. Is that the case, as you see it?

Dr. **Greene**. To a certain extent. In my own opinion, we are putting bandaids on cancers. As I told one of your aides a while ago, as long as individuals are making the kind of money on the sale of drugs as some people are in this country, we're fighting a losing battle. Some way, we've got to drop the income from the sale of drugs, and I don't know how to do that.

Senator **Hollings**. Well, you've got to drop the demand; and education is the best way to do that, don't you think?

Dr. Greene. It will help. It will help, but peer pressure, the methods that I see that are presented on television sometimes, when they do a study on it, they have a way of getting these kids on the street and in the environment like that, and offset so much of what we're doing in education. We think we should continue and work just as hard as we can to reach these kids.

I think that the recent comprehensive health program mandated by the State is a good start because attitudes are so very important. And we need to teach attitudes to our kindergarten students and our first grade students, to take care of your body; and you don't take care of your body by putting these substances into it. That's where we begin. That's why we start in kindergarten.

PUBLIC SERVICE ANNOUNCEMENTS

Senator Hollings. Well, it's very evident, as you indicated, it's got to be constant, kindergarten right on through. And whether we like it or not, probably the majority of the education received is not necessarily in that classroom, it's over on this TV screen, what Ms. Jones was talking about. That is very, very important. That program on—when you say we, Ms. Jones, that's WSPA and who else involved in the media assault being made?

Ms. Jones. I think you can see it on all the stations.

Senator Hollings. All the stations now?

Ms. Jones. I think you can, because the networks are carrying the message to their affiliates. They are regularly airing one a day, at least, I know, on prime time, a strong drug public service announcement commitment from each one of the networks.

During the Super Bowl we saw three. The Super Bowl wasn't that good, but the drug-free messages that came inside the Super Bowl were targeted at a large viewing audience; and the three messages there were public service announcements.

Senator Hollings. Thirty seconds cost $700,000.

Ms. Jones. That's right, and that was a public service announcement.

Senator Hollings. So we got at least a couple of million dollars worth of advertising, there, free?

Ms. Jones. Right.

Senator Hollings. Well, the Saturday program that you are going to air—not just the "Time to Care," but the one that goes on Saturday with the cartoons—I think that is most important. Is that on already?

Ms. Jones. That's April 21, a Saturday morning, at 10:30 a.m. That's a network-centered project. All three networks will black out the regular programming; so the kids will switch the channel, but they'll get the same messages. It's cartoon-formatted, "Cartoon All-Stars." And the message that they will be delivering in cartoon form is prevention: Become drug free, stay drug free. That's a young viewing audience at 10:30 in the morning, very young; but that's where it has to start.

Senator Hollings. That's where it's got to start, and it's got to continue.

Ms. **Jones.** And it's got to be supported. Media must support that type of awareness and education, and I think we have. We have a long way to go, though.

COMMUNITY INVOLVEMENT

Senator **Hollings.** I commend you for it. Ms. Braggs, we were listening yesterday to a comprehensive presentation by Bishop James, Representative McKinley Washington, Darrell Jackson, and Dr. Andrew Chisolm on the drug programs put on within the black community; and, more particularly, about the Drop-A-Dime Program they have sponsored. It has become very, very effective throughout the community there.

As you may know, it was this subcommittee that started funding the National Crime Prevention Program, and the $1,500 that you've got with the Teens as Resources Against Drugs Program was a result of language included in this year's bill. You say you need more, though. Unfortunately, everybody wants more money. Yet, I think it is well spent, and I appreciate what you're doing. I am most impressed, of course, with the comprehensive, across-the-board kind of attempt that is being made by your association to correct the drug problem.

ALCOHOL USE ON COLLEGE CAMPUSES

Now, Ms. Funderburk, you say the major problem is alcohol, and not controlled substances, on these college campuses; is that right?

Ms. **Funderburk.** I would agree, yes, alcohol.

Senator **Hollings.** But you said you are making headway in stopping it? Are you having some effect on these campuses?

Ms. **Funderburk.** The numbers have dropped in the last 10 years. And I doubt you will ever see the complete eradication of alcohol on campus. I went to Presbyterian College, and I heard stories about stills on campus.

Senator **Hollings.** Well, it's against the rules at Furman, but they still have a problem.

Ms. **Funderburk.** Right, yes.

Senator **Hollings.** It's against the rule down there at the Citadel, and they've had a problem, too.

Ms. **Funderburk.** And a lot of that does have to go back to the fact that they can be selective law abiding people, and so they choose not to obey certain rules that they don't like, and one of them does happen to be the drinking rule. Students, on a general rule, I would say, disagree with that policy. They go up in arms when the university says you have to be 21 to drink, and then they go, "But why?" Well, it's in the law code books; you have to be 21.

I also think the fact that it's made so sophisticated, and it's so glamorized to drink and have fun. Dr. Greene was talking about the money that the drug pushers make on drugs. The money that the alcohol industry makes on alcohol—and it's even been said that if they can get an 18 year old drinking a particular brand, it's like buying an annuity. That person will drink whatever it is—and it tends to be, in my experience, Anheuser-Busch products. I'm not picking them out because I'm anti-Anheuser-Busch, but it's Bud, Bud Light, Busch Beer, Michelob. Those are the brands you hear these students use when they have money. If they don't have money, they drink what's on sale. But they know if they start drinking that at age 18, they'll drink it until they're 60 years old, and that's quite an investment that they've made.

They make drinking very appealing and very sophisticated and glamorous. So it's real hard to compete when you're working on, say, a $2,000 a year budget, and you're supposed to provide all this wonderful programming. It's kind of hard.

FAMILY INVOLVEMENT

Senator HOLLINGS. It really is. Ms. Abrams, you've presented the program you have been using with parents over the last 5 years. I like the fact that you're working with the parents and families. Is that the main assault that is being made by your association.

Ms. ABRAMS. We feel that the changes are going to happen there, the lifestyles that children are setting up in middle school and high school, they carry with them to the college campuses or on the job. We feel that if the emphasis can be made early enough in the schools, with the community, and with parents, then a difference can be had.

Senator HOLLINGS. Well, it's really much larger a problem than I ever envisioned. I wish we could have hearings all over the State, in every community, for people to learn and realize and keep up with just exactly what is going on. All of law enforcement is crying for help, and yet we just can't continue to build courtrooms, jails, and everything else like that. So it's got to come at the family level, in the schools, at the college/university level if we are to have any long-term effect on the drug crisis confronting this country.

ALCOHOL USE AND PEER PRESSURE

And in society there's that peer pressure, Ms. Bartos, where alcohol consumption is against the rules. How do you explain that? Is it just the peer pressure of say fitting into society, fraternity life, and that kind of thing?

Ms. BARTOS. Well, alcohol usage doesn't mainly occur on campus, and that's the problem. Now, the alcohol policy has said, no alcohol allowed on campus. Well, the problem is off campus.

Senator HOLLINGS. Off campus?

Ms. BARTOS. They're having their fraternity and sorority functions, and all different kinds of other social activities, small parties, this and that; and they're having a major problem with alcohol usage and consumption. I think we have just as much of a problem as maybe some of the larger universities like Clemson, not because we have as many students, but we still have proportionately the same problem. It's just as much out of hand at our university as it is anywhere else.

CRIME STOPPERS

Senator HOLLINGS. The Crime Stoppers Program, Ms. Jones, you've started to work that into your programming, too; is that right?

Ms. Jones. Right. Well, they really need awareness. It's one thing to be out there—as you said, you don't have enough jails, you don't have enough police officers out there. Therefore, they need extra eyes. They can't pay for those eyes, but if those eyes are the community, then that can help that particular program. The only way the community can become aware is if the media takes that message out to them: "This is where they need the help. You be the eyes."

Captain Blatton in Cherokee County has a group of individuals, sixth graders, called the Hawks. Now, these little guys, they're not snitches, but they can see somebody that's ripping off a bicycle and they talk. He has worked in a rapport with these kids. Now, they're not snitching. They think that that's their civic duty. Once they get older, he's hoping that that particular program will stay with them, that there's a pride there, that there's some concern there. And it's starting at that level. It's a mini-Crime Watch Program.

Now, he's starting a Crime Watch Program in Cherokee County. Now, when we get together at WSPA-TV, he's going to rely on Greenville and Spartanburg to have active programs, to implement his Crime Stopper Program at an adult level, where they see people ripping off shopping carts. That's going to drive up the cost of products in a particular mall. Car theft, those type of break-ins, then, things that people are aware of but are turning their heads. Perhaps that's the answer there. But people have got to be aware that those programs exist, and it's through the media that we can help do that.

Senator Hollings. When you're talking about media and networks, this will be done on all stations as a national network——

Ms. Jones. Crime Stoppers is a national program.

Senator Hollings. I know it's national. I'm talking about the media shows, now, and the cartoons on Saturday, and everything else. That time was given up by the national networks?

Ms. Jones. That's right.

Senator Hollings. CBS, NBC, and all the others. Is cable in this also?

Ms. Jones. I don't know that answer, whether cable is.

Senator Hollings. I see.

Ms. Jones. There are independent stations that are involved. I have noticed several cable announcements that carry public service messages of that nature, but I cannot answer for the cable system.

Senator Hollings. Well, the subcommittee really does appreciate the overview and the comprehensive nature that you folks have made in your presentation here this afternoon. I'm going to leave the record open for questions and any further comments. Do any of the six of you wish to comment further?

Ms. Braggs. [Raises hand].

Senator Hollings. Yes, ma'am?

COMMUNITY-BASED PREVENTION

Ms. Braggs. I would like for you, please sir, to strongly urge in the Senate that we do have increased Federal funds for community-based prevention efforts. Again, all these people here today are doing a great job, and they represent not only the educational system and the media, but we've got to look at providing prevention funds for community based efforts. In Greenville the Phillis Wheatley Association is the only black agency that provides prevention efforts to all of the area centers; and we have the three prevention strategies, four people employed to do that. And we're operating on a budget of about $100,000 for three programs, and it's just not enough. We severely need manpower. We know what the problems are, and even how to address them; but we do need more money, sir.

Senator HOLLINGS. We need to increase substantially, you're correct. We did, last year, from $1.7 million to this year's $5.4 million. But again, that's a drop in the bucket for a State this size and the magnitude of this particular problem. You are right, we've got to do even better and get some of this money to the community level. Are there any other comments?

Ms. JONES. Senator Hollings?

Senator HOLLINGS. Yes?

UPSTATE VERSUS LOW-COUNTRY DRUG USE

Ms. JONES. In South Carolina, is the upstate any different than the low country?

Senator HOLLINGS. No, ma'am.

Ms. JONES. Is the problem cocaine, is it heroin, is it IV usage?

Senator HOLLINGS. Well, they'll tell you crack is the substance of choice at the present time. Of course, that's more dangerous in its permeative nature. With respect to the low and the upcountry, we're threatened down there with the waterways and everything else, the landings, the shipping; in the upstate we have the highways, I-85, I-26, and then I-95 coming across the State.

But, interestingly, as I said earlier today, we had the special agent in charge of the FBI here in South Carolina, who used to be in Chicago, talking about the Greenville Boys. And that's when he was a young agent, back 20 years ago. So there's been operatives coming out of this little country town of Greenville, which is now a very sophisticated metropolitan city; but they have been operating in this fashion for quite a while. I didn't know you could get a drink up here in the Bible Belt, much less operate drugs rings in those States. But it's the same, I'm confident, over in North Dakota, where you don't have either the highway or the coast. But alcohol and drugs are up in the schools there, and everywhere else.

As I mentioned earlier today, I remember when we closed down the drug factories and the laboratories in Marseilles, and we burned the poppy fields in Turkey. And I remember 10 years ago in Peru—where they brought the coke leaves down to be cured and made into cocaine—that they were really worried because drugs had gotten into the public schools there.

This really is an international crisis of a kind that warrants the President's trip day after tomorrow, to try to get control. We know there are certain choke-points with respect to the chemicals. There are six major chemicals that go into the making of cocaine, particularly, MEK—methyl ethyl ketone. You've got to get a sophisticated operation and plant to manufacture it. We've got an international agreement, but only four countries have signed the agreement. We've got control of these chemicals, and as we start exercising this control then instead of shipping it out of the United States and through European countries to Colombia we can begin to reduce the amount of cocaine available. But, we need everybody to join in these international agreements so we can choke it off there and make it very, very difficult to manufacture.

Now, about another illegal drug, marijuana. You ask about the State, from the testimony we heard yesterday, marijuana is the largest cash crop in South Carolina. They're growing it everywhere. We finally had to call in the National Guard to help us in the harvest season to overfly with their planes to spot the growth, help destroy, and make the arrest. We'll be working more on that.

But, overall I find my State, really, very much aware of the drug problem affecting us. It just needs more money and more manpower and far more education. You're ahead, Dr. Greene, in the Greenville schools, but not all of our districts are so fortunate.

Ms. JONES. How do we get it? Do we write for it? Do we petition?

PAYING FOR PROGRAMS

Senator HOLLINGS. I think people want to pay for it. I'll never forget, if we hadn't put on a sales tax back when I was in the legislature, we wouldn't have had good schools. You can't attract Hitachi and great names like Digital here to Greenville, SC, with rundown public education. People are not going to put in their plant unless they can get an education for their children. You're not going to have the sophisticated operations come to the State unless you've got the technical skills. If we hadn't put on the taxes, we'd have never had Greenville Tech. I started that 30 years ago, as we started our sales tax 40 years ago.

Yet, the singsong in America has been to get us politicians reelected, and it's "read my lips, I'm against taxes," which really translates as "the Government is the enemy. Get rid of the Government; the Government is the problem." As a consequence, we've had a downgrading of education, research, drug awareness and treatment, crime, and law enforcement programs. The highways are falling apart; the bridges are collapsing. You've been paying for it, but we've been using your highway tax moneys for the deficit. We've been using your airport and airways tax moneys for the deficit. We've been using the Social Security money as a slush fund—instead of a trust fund. We politicians in Washington have been using it for the deficit, not to build any kind of a surplus or reserve for Social Security. Strom and I, we'll get ours; but, Ms. Bartos, you'll have a hard time.

Ms. FUNDERBURK. Senator Hollings, you mentioned taxing; and I just think an appropriate tax that I think most people in my side of the alcohol industry would support is a tax on alcohol, on beer, specifically.

Senator HOLLINGS. Right, and we're looking at increasing that. And, of course, being a former Governor and a chief law enforcement officer, that's how we used to educate South Carolina. Before we had the sales tax, that's what we used—the liquor tax on beer, wine, whiskey. And it wasn't enough. Now we've got the sales tax, and it's still not enough.

VALUE-ADDED TAX

I don't think we need any more taxes at the local level. You've got up to 5 percent, and you've got property taxes and everything else. At the Federal level you'll find in international competition they have what you call a value added tax where each increment of the improvement or production and delivery of a product is in the price of the article. In Europe our competition, the European Economic Community, the tax is an average of 16 percent: 15 percent in the United Kingdom, 25 percent up in Sweden, 25 percent out in the Pacific Rim in Korea. I'm trying to get just 5 percent here in the United States. It's a consumption tax. If you exempt food, housing, and health care, it's really the more you consume, the more you pay; the less you consume of nonnecessities, the less you pay. And it works.

Then, we can start paying our bills and get the interest cost on the debt down. Now, the interest cost on the debt in the next 2 years will exceed our defense costs. We haven't been paying our bills; we don't have a triple-A credit rating at the Federal level. I got one in 1959 for South Carolina, and we've maintained it since; so when we do all of these buildings at the universities, and the highway bonds, and everything else, we literally save millions.

In the Nation's Capital, your National Government now is spending. It has not kept spending down—they're up there to keep the taxes down and but just keep on spending. The politicians in Washington say, we'll keep our spending down. It's not so at all. Spending has more than doubled, almost trebled. The national debt has trebled. Interest costs have quadrupled and now quintupled, up, up, and away. And we're just spending money for absolutely nothing. The interest cost will jump this year by $27 billion. What I'm saying is as of this fiscal year we've started a new spending program of $27 billion for nothing, just to pay interest costs. You've really got a fiscal cancer.

And I could spend that on all these awareness programs, the Phillis Wheatley Association, education, more DEA agents, more training and skills for the prosecutors, as well as the law enforcement officers. I could use it all the way around. We're using it, we're spending it, but we're not getting anything for it. So that's our fault in Washington, and I'm trying to stop it.

But I don't know how you keep up with the prisons. You've got to build 9,000 more cells in the State in the next 3 years to keep up with the jail population. We've just added $1 billion, way more than 33,000 more cells this year on the Federal level; and we're still 65 percent overcrowded. So, you see, we're behind the curve.

But, as someone said, it's everybody's responsibility: the families, the teachers, the parents, the individual, the media, the school, the social organizations—everyone has got to be a part of this fight in order to win this war. It's not just building prisons and getting enough law enforcement officers. It's a bigger problem than any of us have ever imagined. And now, with the stepdown in defense, I think we can get our hands on it if people will quit worrying about Russians and start worrying about drugs.

Drugs are coming in at every angle. When you see them landing in New York with drugs in their intestines—one was killed in the crash; two, when they recover in the hospital, are waiting to be arrested. You're talking about money, Dr. Greene, that's right. It pays to bring it in.

Here in South Carolina, with the U.S. attorney, the FBI, the DEA, SLED, and our local law enforcement officials, we have the coordination that's necessary and it's on course and I think we can feel good about it. It's just a shortage of money and manpower—we don't have enough.

Any other comments?

Ms. **JONES**. So what you're saying is, "Keep up what you're doing, but you're out there by yourself."

Senator **HOLLINGS**. Keep up what you're doing. The drug crisis is not being ignored. It's frustrating because it takes a good little time to take effect, and it's going to take a generation, in my opinion. It will take at least that 10 to 15 years of consistent drug education to see this wave of drug use subside.

I don't know when it started. When I was young, we never heard of drugs. When I was the Governor and chief law enforcement officer, we never heard of a drug case. Now drugs are everywhere I turn. Look here, this afternoon.

SUBCOMMITTEE RECESS

Thank you'all very, very much. The subcommittee will be in recess until we convene in the morning at the Charleston session. Thank you very much.

[Whereupon, at 3:35 p.m., Tuesday, February 13, the subcommittee was recessed, to reconvene at 9 a.m., Wednesday, February 14.]

FEDERAL, STATE, AND LOCAL RESPONSE TO THE DRUG CRISIS

WEDNESDAY, FEBRUARY 14, 1990

U.S. SENATE,
SUBCOMMITTEE ON COMMERCE, JUSTICE, AND STATE,
THE JUDICIARY, AND RELATED AGENCIES,
COMMITTEE ON APPROPRIATIONS,
Charleston, SC.

The subcommittee met at 9 a.m., in the Ernest F. Hollings Federal Judicial Center, Charleston, SC, Hon. Ernest F. Hollings (chairman) presiding.

Present: Senator Hollings.

NONDEPARTMENTAL WITNESSES

STATEMENT OF CHARLES MOLONY CONDON, SOLICITOR, STATE OF SOUTH CAROLINA

Senator HOLLINGS. Very good. The subcommittee will come to order. The record will show that my colleague, Senator Rudman, had to return to New Hampshire, but the record will remain open for questions from the other members of the subcommittee.

It's significant that we are here, we have already had a good result in these hearings. After the first day in Columbia, Attorney General Thornburgh called and the district of South Carolina has now been assigned seven additional U.S. attorneys. So things are going to start looking up, everybody. We have been shorthanded.

The record would also show that 2 years ago we didn't have a single drug case, Solicitor Condon, FBI didn't, in Horry, Beaufort, or Charleston Counties. Now in the last 2 years with the organized crime task force headed by the U.S. Attorney, Bart Daniel, the DEA program, the SLED program, orchestrating it all, we have stepped up our efforts. In fact, I have never seen or heard of such a step-up in law enforcement. I think it's going to be significant. Everywhere we go we are learning of the need for more jails, more prosecutors, more, more, more. I'm sure that your testimony this morning will verify this same need.

I think the subcommittee is fortunate to have with us today the solicitor from Charleston County, Charles Condon; Chief Thomas J. Sexton of the Mount Pleasant Police Department; as well as Richard Vance of the Charleston City Police; and Lt. Lawrence Oliver of the Metro Squad. Have you ever heard of Bumpy Oliver? State police? Was he related to you? There was a Lieutenant Oliver that I worked with when I was trying cases. I thought maybe you were the same family. But, anyway, we welcome each of you here to the subcommittee this morning.

Let's start here with Solicitor Condon.

Solicitor CONDON. Thank you, Senator Hollings. I want to first thank you for having these hearings of your subcommittee. I must say that in the 10 years that I have been circuit solicitor I have not been asked by anyone on the Federal level for any input whatsoever, and I wanted to really thank you for taking the time to hear from us.

Senator HOLLINGS. Well, we wanted to come down to the front line. I have been listening now to the witnesses we have in the National Congress, but the process is different from you and I in the legislature. At the State level, if we put in a measure for a table and microphone and a glass of water, we say we hereby appropriated $200. That's not the case in Washington at all. At the Federal level it's hereby authorized, $200. Then you have to go all the way back through the appropriation process and have your hearings before the money is allocated and released.

The Appropriation Committee—I will never forget the day after I was elected in 1966—on that Wednesday after Tuesday's election, I was in Georgia and with Senator Dick Russell, who is a good friend of mine, and I wanted to get his help. And he said, he never called me Fritz, he always calls me Fitts. And he said, "Fitts, what committee do you want." I said I want Armed Services. He said, "No; you don't want Armed Services," and he was the chairman. I said, "Why don't I want that?" He explained to me, "You want to get on appropriations because that's where the real money is." And then later, of course, he was the chairman of the Appropriations Committee and he got me on the Appropriations Committee.

For 20 years I have been listening to the rat-a-tat-tat of statistical information, everyone coming in with particular budgets all on the increase side and what have you. But these are Federal witnesses. We don't get the real feel of the urgency until we hear from the police chiefs, the sheriffs, the solicitors, and otherwise, those working in the schools and everywhere else—those actually on the front line. From listening to these witnesses on the front line, we see that illicit drugs are causing problems for everybody. There is just no one solution to the crisis.

Solicitor CONDON. Absolutely.

Senator HOLLINGS. I think we can do a better job, though.

LAW ENFORCEMENT IN THE NINTH CIRCUIT

Solicitor CONDON. Well, here on the local level, and I'm really proud to be at the table with these gentlemen. You have got in Charleston County three of the finest police agencies in terms of apprehending drug violence. From Mount Pleasant, Chief Sexton, and his drug squad. And the Metro Squad, which is comprised of the county of Charleston, north Charleston, and Isle of Palms. Larry Oliver at the head has really been a very good enforcement agency. And the city of Charleston headed by Dick Vance. They have done wonders in the last couple of years in terms of apprehending people who have been violating their drug laws in an area that we have taken a special interest in the ninth circuit, that is the area of seizures and drug assets.

I think in the last year, despite Hurricane Hugo, we were able to seize about 500,000 dollars' worth of drug assets. While I would like to point out the wonderful law enforcement efforts that we have here locally, I do want to show you graphically the problem that we face on the prosecution side.

CHARLESTON DEA RESIDENT OFFICE

Senator HOLLINGS. Incidentally, while he is bringing that up, the seizure of assets, it's interesting for everyone to realize that law enforcement pays for itself. Specifically the Drug Enforcement Administration in 1988 we had a budget of $534 million and we seized the assets and made $614 million. By the way, the DEA cut me two agents in the Charleston resident office after we made money on the seizures. Now we have got them back up from the 5 to the 7, but we need 14. We need double that number. Everywhere we go they're telling us we need more of that particular expertise.

Solicitor CONDON. Absolutely.

ASSET SEIZURES

Along those same lines, I was able, through a grant of Federal moneys appropriated through the Governor's office, to hire someone. He is here today, Robert Baldcerak. He is a former IRS agent who is able to conduct financial investigations. The problem I found, though, in the State of South Carolina, is that although we are seizing all sorts of moneys and bringing all sorts of good seizure cases, because of the State statute, my office has no financial incentive other than to do a good job for these police departments, which we do, because the money goes directly to the seizing agency. So although we seized $500,000 and we expect in 1990 to seize well over $1 million, it goes back to law enforcement. So we're looking at getting the general assembly to change that statute to give 10 to 25 percent to the prosecutor's office.

CASELOAD

You will see in 1986, we had roughly 700 warrant cases come into the Charleston County solicitor's office on drug defendants only. In 1986, I had one person handling those cases at the beginning of the year. In 1987, that number rose to about 1,000 cases with, again, one person assigned, because of budget constraints, to prosecute those cases. But obviously that wouldn't do. So, in 1989, I was able to convince my funding authorities, which is basically the county council, along with some money from the State of South Carolina, to add another person. The warrants jumped almost 1,400 cases.

Here I am in 1988, beginning part of that year expecting two assistant solicitors to prosecute those cases. In 1989, even with Hurricane Hugo, which as you know, I was there with you when you were here helping us with those tremendous problems that came about because law enforcement directed their efforts to emergency relief, but despite Hurricane Hugo which took out the last 4 months of that year from the drug prosecution standpoint, the number of cases still rose in 1989 to right around 1,400 cases. At the beginning of 1989, I had two lawyers prosecuting these cases. Now as we are in 1990, I had three attorneys prosecuting these cases only. We expect these warrants to hit the 2,000 mark.

So, graphically, you can easily see that the real problem we face in Charleston County in the ninth circuit solicitor's office in law enforcement is catching them. We feel that we are doing a very, very good job in prosecuting and locking them up. With the workload and number of violators being brought to us, we simply need more help.

Senator HOLLINGS. How many do you have now? Two?

Solicitor CONDON. Three, starting in 1990. And we expect 2,000 cases.

Senator HOLLINGS. How quick do you give them a trial? I know on the Federal side you have to do it in 90 days, but find them backed up so far. Are you backed up also?

Solicitor CONDON. Yes, sir; because of Hurricane Hugo especially, but we're hoping to give them trials say within 6 to 9 months.

Senator HOLLINGS. Within 6 to 9 months.

FEDERAL GRANTS

Solicitor CONDON. That's where we stand. It's the sort of thing that I feel—forget the fact that I'm solicitor and a private citizen—that we get more bang for the buck, so to speak, if we had another prosecutor. And, one other problem I would like to bring up, too, in terms of the Federal system, we like getting grants from the Federal Government, but the paperwork that you have to do is a real disincentive once you start looking at that process. You can literally spend one-half your time doing the paperwork for the amount of money that we get. So if you could look at that area particularly, that's a real concern for us.

Senator HOLLINGS. What do you use the grant money for?

Solicitor CONDON. The money we got in 1989, we used it to hire the financial investigator to do financial investigation and to add another prosecutor in this area. The problem, though, is that the workload has increased so dramatically and the paperwork necessary to get this money to us, you have second thoughts about even asking for it. We have to, as a matter of political reality, go through the process, because you can't get it any other way, but it's something to look at.

USE OF FEDERAL RESOURCES

Senator HOLLINGS. Could I get a consummate suggestion from you solicitors and so forth how to really apply that money? You can understand the constraints at the Federal level that we have when we look at budgets and Gramm-Rudman-Hollings is supposed to be cutting across the board and cutting all these different things. Washington is saying, "Cut spending, I'm against taxes, reelect me," it's the same song that everybody has got up there.

In the smaller rural counties, in some of these areas, everybody is known. But, if you can get DEA agents to set up stings or set up the cases to catch them and everything else like that, you can use people who haven't been around and are not so easily identifiable.

In other words, if I had the money for 50 personnel at the Washington level, is it smarter to give everybody additional prosecutors, some 50 over the State, or some 50 DEA agents to be used intermittently with all of the different law enforcement agencies to bring and help with expertise and undercover work, sting operations, and everything else to act and make the apprehension? Which would you use the money for? Do you see what I am saying?

Solicitor CONDON. I would use the combination. President Bush has focused, I think rightly, upon the demand-side reduction. Demand-side reduction is not going to be in Federal court, it is going to be in State courts. And so I think a combination is going to be effective. I think we really could use some help. I think I speak for the whole panel here, we really could use the help. We are flat out begging for it.

Senator HOLLINGS. South Carolina's share of the State and local grant money went from $1.7 million last year to $5.4 million this year. And, let me at this point include in the record a chart detailing the actual increases for the different Federal law enforcement budgets that we handle.

SELECTED DEPARTMENT OF JUSTICE AGENCIES

[Dollars in millions]

	Fiscal year—		
	1989 enacted	1990 enacted	1991 request
DEA	534	[1] 617	[1] 791
FBI	1,439	[1] 1,551	[1] 1,729
INS	822	[1] 850	[1] 894
U.S. marshals	205	[1] 239	[1] 290
U.S. attorneys	460	[1] 564	[1] 694
Prison:			
Construction	580	1,397	374
Salaries and expenses	952	1,139	1,372
Drug grants	150	445	490
Total Department of Justice	6,690	8,606	8,971

[1] OCDE dollars included.

You can see the increase, of course, in prison construction. I understand at the State level South Carolina is looking at the actual need of some 9,000 additional cells, at the cost of $180 million. Well, we put in for this present year, an increase of some $1 billion for Federal prison construction. We are building 33,000 cells at the Federal level yet we are still 65 percent overcrowded. And Federal judges on these benches will have to let them go. And so you can see that problem.

DRUG EDUCATION

Solicitor CONDON. The one area I would like to touch upon, it relates to—something I know you have a keen interest in, and that's education. I do think that the ultimate solution to this drug problem in this country will be education. And one program, as a matter of fact Mount Pleasant has spearheaded in the area locally that I have been wonderfully impressed with, is Project DARE. And this involves a police officer, and I think you will be hearing from her later on today, going to the schools, being a role model for children. It's not one of these programs where you come in for 1 day only and leave and "Just Say No" sort of reality. They're there for the children over an extended period of time at an age in which you can change their attitudes: Fourth and fifth grades.

Now the problem we have had in Charleston County which has been very interested in this also, along with the North Charleston Police Department, we're having difficulty getting into every school because it is a drain on the police budgets. It's a program that involves total commitment by the officers, so it's a drain on the police budgets. And some help, some Federal funds or some sort of incentive could be given to the police departments to assign these officers. I think it's this next generation that we have coming up where we can literally change or foster appropriate values. It's the sort of program that approaches the drug problem realistically. It talks about the ability to make your own intelligent choices and to realize the damages that drugs cause. While the preliminary timeframe is too short to be able to say this is the most effective program, all the studies that I have seen point to this one as probably the one that's going to, in the end, 10 to 15 years from now, be the one that is most successful.

So if you could look at that program also, I think the educational aspect will be the ultimate solution. I think Project DARE can be a very, very important part of the ultimate solution. Thank you very much.

PREPARED STATEMENT

Senator HOLLINGS. Thank you very much. We will place your statement in the record at this point.

[The statement follows:]

STATEMENT OF CHARLES MOLONY CONDON

I would like to commend Senator Hollings and the members of this subcommittee for seeking the input of local law enforcement officials concerning the war on drugs at the local level. There is no question that every community is truly a battleground in this nationwide fight against drugs. It is on these battlegrounds that the war on drugs will ultimately either be lost or won. I sincerely believe it can be won if we mobilize our national will and resources.

By way of background, I am Solicitor of the Ninth Judicial Circuit of South Carolina. The Office of Solicitor represents the State of South Carolina in the prosecution of those defendants accused of violating the criminal laws of South Carolina and more specifically the state criminal drug statutes. Most states refer to my position as District Attorney or State's Attorney. The Ninth Judicial Circuit is comprised of Charleston and Berkeley Counties. These two areas which differ widely in make-up. Charleston County is primarily an urban area with a population of approximately 300,000. There are seven police agencies in Charleston County responsible for the cities of Charleston and North Charleston, the unincorporated areas of Charleston County, the town of Mt. Pleasant, as well as the outlying islands of Folly Beach, Isle of Palms, and Sullivan's Islands. Charleston County's extended coast line provides many opportunities for the importation of drugs, so therefore this area must be policed vigorously.

Berkeley County, while still primarily rural, is experiencing rapid growth. It is the largest county in the State. More rural in its northern areas, the southern portion is surburban and rapidly exploding in population. Berkeley County has ten local police agencies. Because of its large size and close proximity to interstate highways, Berkeley County provides many opportunities for drug importation via either airplane or car. The domestic growing of marijuana is also a problem.

It is my belief that the strict enforcement of drug laws cannot be overemphasized. A large percentage of crimes are committed by defendants either on drugs or to get money to buy drugs. Of course, the harm or misery caused by the use of drugs is incalculable.

The Ninth Circuit Solicitor's Drug Strike Force Team was created in 1989 to highlight the importance of the prosecution of drug cases. Former Assistant United States Attorney Robert Haley was appointed head of the Team. As budgets would allow and with the help of a grant of federal money awarded through Governor Campbell's office with a match from Charleston County Council and resources from Berkeley County Council, personnel was added. Currently the Strike Force has four full time attorneys for Charleston County. An attorney devoted exclusively to drug asset seizures, the first such position in South Carolina, is part of the Strike Force. Additionally, two investigators are employed in this area, one of which is a former IRS criminal investigator with the ability to conduct financial investigations. Those professionals keep in close contact with the various drug units in police agencies, coordinate seizures, and litigate our various drug cases. The size of our staff devoted to drug investigation and prosecution has quadrupled since 1980. Berkeley County has its first full time prosecutor assigned to drugs as of 1989.

The Strike Force has been highly successful. Hundreds of drug defendants have been sentenced to prison with sentences up to 30 years without parole. Numerous drug importation and drug dealing rings have been broken up. Since July 3, 1989, this office in Charleston County alone seized $400,600 in personal property, land, vehicles, and currency. We expect that in 1990, despite Hurricane Hugo, this amount will be much greater. These moneys are returned to the seizing law enforcement agency to be used in the fight against drugs. Our local police agenices are to be commended for their vigorous, aggressive attitude regarding drug abusers and dealers. The Mt. Pleasant Police Department, the Charleston Police Department and the METRO Squad composed of Charleston County, North Charleston and Isle of Palms police agencies have worked tirelessly in the war on drugs in our community. Taking the profit out of drug dealings is one of the effective weapons in law enforcement's arsenal. Not only does the money and property seized from drug dealers assist financially law enforcements efforts, but it takes away from the drug dealer the reason he or she is in business—to make money.

While the Ninth Circuit Solicitor's Drug Strike Force has been quite successful, the prosecutorial staff available today is simply not adequate. There has been an explosion of defendants charged with drug offenses. Many defendants request jury trials because of this office's policy against plea bargaining with drug defendants simply to expedite the flow of cases. Each assistant solicitor assigned to the Drug Strike Force has to carry a caseload at any given time of up to 350 cases. This compares to a caseload of 100 to 150 an assistant is required to carry in the Federal System. Currently in the Ninth Circuit there is an immediate need for at least an additional five assistant solicitors to prosecute drug cases. Additional resources from the County and State to meet this need have simply not been made available because of the budget constraints these political entities face.

In the war on drugs, President Bush has rightly focused on interdiction, education, treatment and reduction for the demand of drugs. The Office of Solicitor can have a great impact on the inflow of drugs into our community and the reduction of demand by the vigorous enforcement of our drug laws. To do this, however, we need more resources. The Federal Government can and ought to supply those resources.

The ultimate solution though, to our drug problem, I believe, rests with education. We must start with our children. They must be taught at the earliest possible age that drug use and abuse is wrong. One of the most effective programs in this area in the country started in Los Angeles by the Los Angeles Police Department. Drug Abuse Resistance Program (DARE) is a coooperative effort between law enforcement and the schools whereby police officers act as role models and teachers for children in elementary schools. Officers teach extensive courses which promote good self images and the ability to make proper choices, especially when it comes to making decisions about drug usage. The Office of Solicitor in the Ninth Circuit in conjunction with the Charleston County School District, a local law enforcement support group called Committee of Hundred, headed by Jim Grego, and local police departments are trying to promote project DARE in our schools. To date, Mt. Pleasant Police Department, Charleston County Police Department, and North Charleston Police Department have taken a leadership role in this area. Reluctance to institute the DARE program has been met because this effective program is a drain on police budgets. The Federal government can and should supply resources to promote this vital educational effort.

STATEMENT OF THOMAS J. SEXTON, CHIEF OF POLICE, MOUNT PLEASANT POLICE DEPARTMENT

Chief SEXTON. Senator, I, like Solicitor Condon, would like to thank you for all you have done for South Carolina law enforcement as well as what you continue to do. I want to stray here just a second and particularly thank you for your work in the emergency law enforcement assistance that South Carolina received after the hurricane. I am pleased to tell you that the Mount Pleasant Police Department received some $207,000 in that $5 million that was sent to the State.

Senator HOLLINGS. Well the first thing that impressed me, or one of the first things, I never will forget that north Augusta sent the police department down to help. Do you remember?

Chief SEXTON. That's correct.

Senator HOLLINGS. Everybody was volunteering and helping all around, but we need far more help and we are still rebuilding.

Chief SEXTON. I would like for you to know that that really meant something and really helped us in the time of our need in Mount Pleasant.

I would like to use my time talking about those things that I think work well, particularly as it relates to law enforcement in Mount Pleasant at the local level. I'm not going to talk about statistics and what have you, I am sure that you have heard all of those and there is no secret that we have a drug problem in South Carolina.

MULTIJURISDICTIONAL TASK FORCE

My experience has been on the enforcement side and that a multijurisdiction task force is the best approach. The best success that we have had in Mount Pleasant is when we work closely with other agents, such as the Charleston Police Department, county police department. I would suggest to you that when priorities are set for funding, that multijurisdictional task forces be high on that list.

DRUG EDUCATION

Second, I would echo what Solicitor Condon has said on the education side. Enforcement obviously has got to continue, but I think that we have got to switch the emphasis to education. Particularly so at the earliest possible point, a child's formative years. South Carolina public school surveys tell us that about the seventh grade level is when drugs begin to be seriously introduced to our students—cocaine, marijuana, alcohol. We need to reach those students before they get to the seventh grade level, obviously.

Mount Pleasant, the program that the solicitor spoke to is Project DARE. We have used that program and targeted the fifth grade level. We have been doing it for 2 years and we don't have any real statistics to back up the results of it yet, but in other areas and other parts of the country where that approach has been used, the results have been good. Then further supplement that by doing visitations to kindergarten through fourth grade trying to instill in them at the earliest age possible the harmful effects of drug abuse.

I think the education approach, those programs which target a student at the earliest possible point, is our best approach. I tell you that costs a lot of money. To run that program in Mount Pleasant, Project DARE, for 18 months, three officers dedicated to nothing but drug abuse resistance education, cost $115,000.

We didn't have that money, but we were able to secure Federal funds to run it. There is an excellent program the U.S. Department of Education has, drug-free schools. I'm sure that you're well familiar with that. That is one of the most streamlined, best approaches at the Federal level that I have ever seen. It allows local law enforcement to make application directly to the Department of Education. They tell you beforehand what funding is available. They tell you approximately how many programs can be funded. If you were accepted and assigned a staff person to you to communicate with and it cuts out all of the bureaucracy, paperwork is minimal, it's an excellent approach. I'm sure that you are very much aware of that. Mount Pleasant is involved in it and it has worked very well.

INVESTIGATORS

In terms of some of our needs, like the solicitor has said, we need more prosecutors available to us. We also need more staff people available to us in this office, particularly those who are skilled in financial investigation. In small departments, with only 47 officers like Mount Pleasant, we don't have those kind of people. We have a need for those kinds of people. I would simply say that that should be a funding priority as well.

SUSTAINED FEDERAL SUPPORT

And last I would say to you, we need a sustained effort in terms of Federal funds. Perhaps that's the most difficult thing. As you know, last year South Carolina received $1.7 million. This year we have gotten $5.4 million. I'll tell you that this year with $5.4 million, we'll do some real good. There will be a lot of programs at the local level, but if that Federal funding drops next year back to $1.7 million, a considerable number of those programs are going to go by the wayside because local law enforcement can't continue to sustain them because of the costs. I don't know how you can do that. I just pointed out that that is something that we really need to look at. And that's a sustained effort in terms of the funds over a period of time.

Again, I thank you for this opportunity. I sincerely appreciate what you're doing and would be glad to answer any questions that you might have for me.

PREPARED STATEMENT

Senator HOLLINGS. Thank you. We will insert your statement in the record and then I have some questions.

[The statement follows:]

STATEMENT OF THOMAS J. SEXTON

Senator Hollings, members of the Committee, Staff: I first want to thank you all for what you have done and continue to do for South Carolina law enforcement. We both know that the overreaching impact of drugs and crime in this country presents a battle to be fought on many fronts. Few states, if any, in this country have been spared the social and economic repercussions of drug abuse. Nearly two years ago a presidential commission termed the drug problem in our county a "national emergency." Yet, today drugs thrive in the shadows of our society and drug abuse has been described as America's nightmare that is tearing apart families, turning schools into drug markets and threatening the very safety of our citizens. This crisis is no less serious in South Carolina. Federal District Judge for South Carolina, Matthew Perry, has characterized drugs as "an evil force . . . loose upon our society and is wiping our children from the face of the earth." Top law enforcement officials in our state term this the drug age. Statistics certify these disturbing assessments. For example, in 1983 there were slightly more than 5,000 drug arrests in South Carolina. Five years later, that number has risen to well over 14,000. 48 percent of our prison population committed their current offenses while under the influence of drugs or alcohol. Nearly 2 percent of the State's population are seen as clients of the South Carolina Commission on Alcohol and Drug Abuse. I wish I could tell you that the drug wars we read about from Washington don't happen here. I cannot. The truth is, just a 20 minute drive from where we sit, citizens are shooting citizens in the street over drug turfs. I wish I could tell you that drug-related police corruption is centered around Miami. It is not. Just a few weeks ago a local law enforcement officer was sentenced in this very judicial center for such an offense. In my community of Mount Pleasant, the presence of drugs and alcohol abuse are undeniable. Last year we arrested and charged a young man who had broken into 51 homes in Mount Pleasant. He was driven by a $500 a day cocaine addiction. Most recently, we arrested a young man for breaking into 11 businesses in Mount Pleasant. He was driven by a $300 a day cocaine addiction. There can be no argument that drug abuse constitutes an engine for crime and threatens a future society of emotionally mature, strong and healthy men and women. What has not been clear, however, is what can be done to dismantle that engine. I do not have that answer but I will share with you what I think works well and what some of our needs are. On the enforcement side, I believe multijurisdictional task forces at the local level are the best approach. I would suggest priority be given to educational programs that target the earliest point possible of a child's formative years. I would offer that specific allocations be made available for increasing the staffs of local prosecutors, with specific emphasis being placed on attracting those with arrest/forfeiture skills and last, perhaps the most difficult, a sustained level of federal funds to the states that will allow long-range approaches at the local level.

I would be pleased to answer any questions you may have.

FEDERAL RESPONSE

Senator HOLLINGS. The sustained effort is going to be, in my judgment, double. We can see on the early morning news out in Kansas, drugs are not just in coastal States with all the shipping and highways, and everything else. Drugs are in the mid-country too. In Kansas, they set a referendum of a penny sales tax in order to help local law enforcement get the drugs.

I'm not suggesting that we ought to do it at the local level, I'm trying to find out what we have got to do at the Federal level. But it's striking that we're going to have to coordinate, Solicitor Condon, all the solicitors and the chiefs, and so forth together. Yes; there's going to be additional add-ons to these Federal grants and everything else like that because this thing is bigger than I ever thought it was. Many of us in Washington, we just see the Federal agency people who say people are interested in drugs and so Congress says, "Let's build on that and reelect me." It's more severe. It's more permeated in our society than I every imagined.

COORDINATION

Let us ask Chief Sexton, tell us about coordination with the local, State, Federal, the U.S. Attorney's Office. What kind of coordination do you have? Are there any gaps in that coordination?

Chief **Sexton**. From the Federal level I have always received cooperation. And we have made requests of DEA and they have been very responsive. At the local level I think there have been some problems, but that lies with the local police administrators. I think that in the past we could have done a better job in bringing cooperation. I think that is much improved and there is progress being made with multijurisdiction task forces in this Charleston area. I have absolutely no complaints with Federal agencies.

Senator **Hollings**. You can get information from the Drug Enforcement Administration as well——

Chief **Sexton**. Yes, sir.

Senator **Hollings** [continuing]. As well as deliver it to them?

Chief **Sexton**. Yes, sir.

Senator **Hollings**. In building up a data bank, I want to make sure that you have access to it. You're the folks that are really going to feed all the information in and be told, like in the upcountry, they were told, no; we can't share that information.

Chief **Sexton**. That has not been my experience with DEA.

Senator **Hollings**. Well, that's better. That's better.

MONEY LAUNDERING

Solicitor Condon, let me ask you about, about the banking and laundering of money. Do you have any effort in that regard?

Solicitor **Condon**. Yes; we do. We have got, that's the focus of our new program actually in the drug strike force that we formulated last year. Here and again, the problem is the manpower. But I have got one expert doing this on a daily basis with the assistance of legal help. His background is being an IRS criminal investigator following the mobs over the last 10 or 15 years. He has done these sort of investigations.

So on the local level what we do, law enforcement agents bring these potential cases and we're in touch with them on a daily basis. We do trace their moneys. That's been quite fruitful in terms of uncovering assets in this community. In fact, you'll see some seizures in the next couple of years here that probably will be of some concern that we thought perhaps these people might be businessmen and these sort of things. Obviously the reason people deal drugs is to make money. There are people, even as we speak, making money in this community today off of human misery.

I think one of the best ways to attack them is to take their money. You can put them in jail, but some of these people would just as soon spend 1 or 2 years in jail if they're making $100,000 or $200,000 a year. So we have been very keen on this idea and really I must commend the local law enforcement agencies, they have uncovered some wonderful information for us. We are acting on it. Again the problem is manpower.

GRAND JURY INVESTIGATIONS

But one small thing, too, I would like to bring up in terms of the Federal system, I have been very impressed by the new U.S. attorney. I do think Mr. Daniel is doing an excellent job. One glitch we have run into, though, in terms of sharing information and working cases together is in order for my office to get the grand jury testimony under the Federal rules and to work cases together, one of my assistants or I have to be appointed an assistant U.S. attorney. That apparently is a very, very difficult process. We have been really sort of informed that it's almost too much trouble, we could do it on a case-by-case basis. We have to go to Washington to the Justice Department to get it approved, but that's slowing us up in terms of sharing information.

Senator HOLLINGS. The presiding judge can't appoint you?

Solicitor CONDON. It has to be approved through Washington, DC, and it's a major process.

Senator HOLLINGS. I remember in the past the judge would appoint you and you would assist in that particular case. I don't mean to get you on the Federal payroll and get the cash and get the time and all that.

Solicitor CONDON. No, no.

Senator HOLLINGS. But, more on an ad hoc basis, the prosecuting basis.

Solicitor CONDON. All we want to do is see the grand jury testimony.

Senator HOLLINGS. You can't make a motion?

Solicitor CONDON. My understanding in talking to Mr. Daniel is that because of the paperwork involved in the Justice Department guidelines, it's a process. So if that could be streamlined, we would love to work cases with them because they do have, as you know, some resources that we don't have, particularly to report grand jury testimony, which we don't have on the local level. So we would like to be able to do some things together, and that is a stumbling block.

Senator HOLLINGS. We will be considering a crime bill in the U.S. Senate next week and this is a good point to be brought up with our crowd. And really you don't want them permanently on there, but from time to time the local solicitor would be appointed.

Solicitor CONDON. Absolutely.

Senator HOLLINGS. And the judge. And then you can keep a count of the cases and everything that is going on.

STATEMENT OF LT. LAWRENCE B. OLIVER, CHARLESTON COUNTY POLICE DEPARTMENT

Senator HOLLINGS. Lieutenant Oliver, we welcome you and appreciate hearing from you, sir.

Lieutenant OLIVER. We appreciate your interest and we thank you for coming.

We have had considerable success, we feel, over the last few years, of incarcerating the individuals involved with the illicit narcotic trafficking. Statistics have proven, which I won't go into all of them, that every year our arrests have increased. Every year we're putting more individuals in jail, yet it has not stopped, it has not put a dent into the amount of drugs that are flowing into Charleston County. We have not learned yet how to stop this flow, but with the Government's help, Customs, the Coast Guard, DEA, we can do something about the hundreds and thousands of pounds of drugs we're still importing into this community every year.

Another aspect that we looked at is, how do we stop these individuals who are purchasing the illicit narcotics. We do that by street sweeps. We try to identify the individual that is involved in this activity, try to take them down, try to remove them from society if we can. Another aspect is, as has already been indicated, their assets. In 1986, the Metro Unit, which Mr. Condon has already stated, composed of North Charleston Police Department, Isle of Palms Police Department, and Charleston County Police Department, seized, for 1987, we seized in excess of $56,000 cash from drug deals. In 1989, that figure jumped up to $236,000 cash.

Property alone in 1987 was in excess of $400,000: Property, assets, paraphernalia, weapons. In 1989, those figures jumped up to over $1 million that was seized.

In 1989, to help and identify and address this problem, Solicitor Condon formed a drug strike force in an effort to identify, and with the experience going to the background of the individuals, what do they own. At the local level we don't possess the experience or the knowledge to do this. So with this in mind, we started an investigation back in August 1989 which led to the arrest of a large Colombian who is responsible for trafficking cocaine in this area. A 42-count indictment of this organization, which are local street dealers, local dealers. I believe we seized somewhere in excess of 500,000 dollars' worth of property from that one individual. One individual organization.

So we feel we were making some headway with the dealers, but we don't feel that we were making headway with the supply that is needed, or the demand. We're losing the ball totally. Only through education, as already indicated, can we hope to save the future generation. I really believe we have lost part of a generation already. We can't turn them around. If they have a desire to utilize the drugs that they have been using so far, we can't stop them. It's been proven that you might be able to get them to stop using the drugs for awhile, but from some of the testimony that I have heard once they get near it again, if they try it one time, they're back on it. So we failed miserably in law enforcement and in the community to stop this type of activity.

I believe another function of Government is to assist the communities with their personal problems or their problems within the community. Law enforcement is to incarcerate them if we can for violating the law, yet the Government itself needs to address the problems within the community. The environment within which the people live, the lack of education of the individual, or the lack of jobs available for the individuals who have a desire to work.

As far as the individuals who have a desire to violate the law, we need more prisons, which we can't afford on the local level. I realize that the Government is continuing to finance the institutions needed, yet people are going to jail, and they know that if you sentence me for 5 years for possession of cocaine, they'll keep me 2 years. That's all. I'll be back out. We need some stricter sentences as far as possession. Now State law has indicated that trafficking is a mandatory jail term. Which is good for us. It's bad for them.

Another problem that we need to address, too, are the State laws regarding the possession of firearms in conjunction with narcotics. In 1986, we seized 12 weapons in conjunction with raids on individuals dealing drugs. The majority of these were small caliber weapons. In 1988, we seized 63 weapons, the majority of which were higher caliber than what the police departments were using. That's a 525-percent increase in the amount of weapons that we seized. Three of these weapons were semiautomatic machine guns, and one had a laser scope.

So the potential for violence in our community is growing every day. It's only a matter of time before these drug dealers are forced to either fight or get out of the business. They're not going to get out of the business. If they are facing 25 years for trafficking and fear of losing all their assets, they have nothing to lose. So that's another problem. State law needs to be designed to resemble Federal statutes that makes it mandatory for anybody in possession of a firearm in conjunction with drugs, it's a 10-year sentence regardless, you must serve 10 years for that firearm violation. The drugs are in addition.

If we in law enforcement can't join together and work as one unit, the individuals involved in these illicit activities will use our boundaries against us. We must be able to exchange information, exchange personnel, or anything that it takes to infiltrate these organizations. Communities have to realize that it's my job, I agree, and I got no problem with that, but my job is 5 days a week, 8 to 10, 12 hours a day. It's their problem 24 hours a day, 7 days a week.

I feel that a lot of the citizens, and not all of them, don't want to get involved. It doesn't affect them directly. I understand their concerns about becoming involved with law enforcement matters and I understand their concerns about individuals who are dealing in illicit narcotics, to find out that they are talking to the police. And we have a wonderful organization called Crime Stoppers in this area. Anybody can pick up the telephone and call and they will take all of the information you have and never reveal your name to anybody. You don't have to give them your name. Until citizens realize that if they don't get involved in it, they're not helping the problem, they're not helping to solve it, they are a part of the problem. We need the information. In a lot of areas we receive it and in a lot of areas we don't. I believe that that is another area that needs to be addressed.

PREPARED STATEMENT

Senator Hollings. Very good. We will place your statement in the record at this point.

[The statement follows:]

STATEMENT OF LT. LAWRENCE B. OLIVER

To understand where local law enforcement is in its efforts to suppress the use of and trade in illegal drugs, it is necessary to look at where local law enforcement has been.

As we entered the 1980's, drug arrests accounted for approximately 5% of all the arrests made in the state of South Carolina. Toward the end of the 80's, it constituted 8%. At the beginning of the decade, the sale, manufacture and/or possession of marijuana was the predominant charge against those arrested on drug related offenses - for those over the age of seventeen, as well as for those under the age of seventeen. Cocaine related arrests made up less than 1% of the arrests of those under seventeen and approximately 5% of the arrests of those over seventeen. By the end of the decade, arrests for marijuana related offenses still topped the list, but cocaine related charges had increased dramatically - to the point that the sale, manufacture and/or possession of cocaine contributed to 33% of the total ~~of~~ drug related arrests. Even more alarming is the fact that cocaine related charges comprised about 10% of those under seventeen and 33% of those over seventeen. The trends experienced throughout the State, as a whole, were experienced in Charleston County as well.

According to the 1980 census, Charleston County - with a population exceeding two hundred thousand people and growing every day - is the largest county in the state of South Carolina, in terms of population. In terms of land mass, Charleston is the sixth largest county in the state with some 945 square miles of land and water.

Approximately three quarters of Charleston is made up of forest, woodlands, marsh, swamps and inland waterways. There is 94 miles of coastline. Each of these factors has certainly contributed to the fact that Charleston County's arrest rate for drug related offenses has risen some 24%, going from 1,156 arrests in 1980 to 1,521 in 1988. Each of these factors has certainly contributed to the fact that Charleston County has led the state in the number of drug related arrests in seven of the last nine years (1980-1988).

If the picture painted thus far seems grim, the reader should be forewarned that it only gets worse.

Last year, the Charleston County Police Department did an in-depth analysis of drug enforcement activity - for a three year period (1986-1988). What we found was amazing and is depicted in the following chart:

	1986	1987	1988
Drug Investigations	218	241	383
Drug Arrests	204	221	386
Heroin Seizures	1 oz	19 ozs	33 ozs
Cocaine Seizures	2.5 lbs	5.7 lbs	35.9 lbs*
Marijuana Seizures	42 lbs	166 lbs	187 lbs

*22 pounds represents case worked in conjunction with D.E.A.

We are conducting more investigations than ever before. We are arresting more people, on drug related charges, than ever before. More heroin, cocaine and marijuana has been seized than ever before. Are these dramatic increases an indication of our success in the drug enforcement area? Certainly not! They just reemphasize what we've been hearing for the last few years - that there are more drugs on the streets and more people are using drugs. For the purposes of drug enforcement, higher numbers point to a failure in enforcement efforts rather than a success.

Another frightening aspect of current illicit drug activity is the drug dealer's propensity for weapons. In 1986, the Metro Major Case Unit seized 12 weapons as the result of drug investigations. 1988 saw that figure increase by 525%! Sixty-three (63) weapons were seized in 1988 and of those sixty-three, three (3) were semiautomatic machine pistols - one with a laser scope. So, not only is the drug trade becoming more prevalent, it's becoming more dangerous as well.

Changes in demographics, changes in geographics and changes in the overall trends in the drug industry have created a whole new set of challenges for law enforcement as it enters the 1990's. Let's now turn to how this department intends to meet those challenges.

Drug enforcement in the Charleston County Police Department is not confined to the Metro Major Case Unit. As the drug problem permeates every aspect of society, it also permeates various aspects of law enforcement. It has been shown that drugs have directly influenced the occurrence of other crimes - most notably robbery and burglary. As the drug epidemic impacts more and more criminal activity it transcends the boundaries of a "narcotic unit's problem" and becomes every peace officer's problem. And in the Charleston County Police Department, we enlist every officer's help.

The Charleston County Police Department's war on drugs is a four (4) front war. We approach drug enforcement with the '4-E Community Safety Philosophy' - educate; embrace; enforce; environment. Let's take a closer look at each front.

EDUCATE

Education is perhaps the single most important weapon in the fight against drugs. Law enforcement, as a whole, has not been real successful in curtailing the 'supply' side of the drug business. It is obvious, particularly at the local level, that we must focus on the 'demand' side.

One way to do that is through knowledge and it is important that we impart that knowledge at an early age. In 1988, the state of South Carolina saw 317 people - under the age of 17 charged with a violation of a drug law. Of the 317 arrested, 174 were 16 years of age, 87 were 15 years of age, 50 were between the ages of 13 to 14 and 6 were between the ages of 10-12. So it is imperative that we reach the young!

Toward that end, the Charleston County Police Department participates in a number of 'education' oriented programs. Our 'Community Safety Officer' Unit currently has four D.A.R.E. (Drug Awareness Resistance Education) programs ongoing in local elementary schools. Each year, we are an active participant in the 'Just Say No' anti-drug rally. Our narcotics officers go into the schools and teach about the dangers of drugs.

But, our efforts to educate aren't confined to just children. Our officers speak to business groups, as well as neighborhood watch groups. We are actively involved in local 'Law Enforcement Day' events and are always careful to include some type of drug information booth at these gatherings.

We recognize the need to educate as much of society as we can possibly reach. Through the many programs that we sponsor and/or participate in, we are doing just that.

EMBRACE

Our second front in the war on drugs acknowledges the fact that law enforcement can't do the job alone. We can't operate as a separate entity - unaffected by those around us. Therefore, it is critical that we 'embrace' the community that we have sworn to serve and enlist their help.

Again, the Community Safety Officer Program is responsible for the lion's share of this effort. Not only have we taken steps to make drug awareness issues an integral part of the crime prevention endeavor, but we have taken steps to ensure that we reach as many people as possible. Each of our Community Safety Officers are responsible for an outlying area, and one is assigned to our highest crime area.

Our efforts in the high crime area - Union Heights - is perhaps the best embodiment of the 'embracing' philosophy. Recognizing that Union Heights was one of the highest crime areas in unincorporated Charleston County and that drugs were directly responsible for the majority of the crime, we 'embraced' community projects of the people of Union Heights. We supported the creation of Citizen Action Groups.

Embracing community projects such as alternative education programs, job/career orientation programs, physical and mental health programs reinforce the importance of positive social interaction within the community and between community members and outside agencies. Supporting the local civic center with sporting events and special holiday activities provide alternative activity for school age children who may otherwise get into trouble.

We encourage citizens to report criminal activity during attendance at these programs and find that Crime Stoppers has benefited as a result. People call people who know one another. Embracing community projects allows us to get to know each other.

Union Heights proved that the principle of 'embracing' the community was a sound one and it's one that all police departments should use everywhere.

ENFORCE

The enforcement aspect of our four front war is not as simplistic as it first appears. Not only is it important that we increase conventional enforcement efforts, but it is important that we search out and implement unconventional enforcement efforts.

We have been active with the Governor's RAID (Retaliate Against Illegal Drugs) team - assisting in locating and destroying patches of domestically grown marijuana. Additionally, the police department has its own airplane and frequently flies its own 'seek and destroy' missions.

As pointed out earlier, the Charleston County Police Department has been successful in increasing conventional enforcement efforts. We are putting more people in jail and taking more drugs off the streets than ever before. Our 'unconventional' efforts have experienced a similar success.

One of the first 'unconventional' steps we took was in 1987 with the formation of an 'Asset Forfeiture Unit'. The Unit put another officer in the Metro Major Case Unit and was created with the following objectives in mind:

- o Enhance investigative efforts through the acquisition/utilization of intelligence information.

- o Provide forfeiture/seizure related training to various units.

- Increase the number of seizures of drug related assets.

- Impact drug related criminal activity.

- Provide a method for expanding Department resources.

In March of 1988 the Charleston County Police Department was awarded a federal grant - through the Narcotics Control Assistance Program - that allowed for the creation of a "Drug Interdiction Team". The primary purpose of this two-man team is to impact the flow of drugs into the Charleston County area with particular attention given to commercial and public carriers (i.e., airlines, bus lines, train stations, etc.).

Have these 'unconventional' efforts been worthwhile? Consider the following:

	1987	1988	1989
Street Value of Drugs Seized	$626,266	$2,011,294	$3,463,602
Currency Seized	$ 56,504	$ 114,766	$ 236,380
Property & Paraphernalia Seized	$401,577	$277,976	$1,097,624

In addition to the Asset Forfeiture Unit and the Interdiction Team, other 'unconventional' methods have included the actual 'metro' concept itself, along with the formation of numerous special task forces.

As the drug industry changes - so must law enforcement. We must be open minded, creative and willing to try new approaches to an old problem.

ENVIRONMENT

Together, the community and police identified environmental issues that contributed to the Union Heights problem - i.e., abandoned vehicles, abandoned houses, overrun lots, etc. We obtained media support and recognition for what we were trying to do. We gave the people of Union Heights a Community Safety Officer - a pipeline to the police department. As the problems were identified, they were resolved. Abandoned vehicles were towed, abandoned houses were torn down, overrun lots were cleared out. We created a strong police presence and increased enforcement efforts. Slowly, but surely, we took back the streets and we did it together - the police and the community.

Having discussed where local law enforcement has been (in terms of drug enforcement) and where it is now, it follows that this report should conclude with a look at where law enforcement should be headed.

The Charleston County Police Department will continue to utilize the '4-E Community Safety' philosophy - educate, embrace, enforce and environment. We will continue to search out 'unconventional' enforcement methods. As the drug dealers/smugglers become more sophisticated so will enforcement efforts. The number of drug arrests and the amount of drug related seizures will continue to climb - but as pointed out earlier, this will not be an indication of our success, rather it points to our failure. With illegal substances pouring into this country and hitting the streets hundreds of pounds at a time, it is unreasonable to expect local law enforcement agencies to experience any degree of success when all we are capable of doing - for the most part - is taking it off the streets an ounce at a time. So what are the answers?

Legislation - We must enact legislation that guarantees that those involved in the sale, manufacture, and/or distribution of illegal substances spend time in jail. We need more mandatory sentences. We need laws that will help us single out and remove from society repeat drug law offenders. We need legislation like the Anti-Drug Assault Weapons Limitation Act. We need laws that make possession of a firearm in conjunction with a drug violation a mandatory ten year prison sentence.

Education - The federal government must take steps to ensure that efforts to educate the public about the dangers of drugs, as well as the penalties associated with violating drug laws, continue. Programs such as D.A.R.E. and 'Just Say No' are an important resource in the war against drugs.

Funding - The federal government must continue to make monies available at the state and local level, so that local enforcement agencies can pursue new enforcement methods.

In short, we must continue with the enforcement methods that have stood the test of time, we must not be afraid to seek and implement new enforcement methods and we must continue to work together - law enforcement agency with law enforcement agency, law enforcement agency with community, and law enforcement agency with business - to fight the problem that effects us all.

STATEMENT OF RICHARD A. VANCE, SERGEANT, CHARLESTON POLICE DEPARTMENT

Senator **HOLLINGS**. Sergeant Vance.

Sergeant **VANCE**. Thank you. One of the most frustrating problems we have at the Charleston Police Department is how the offenders are handled after their arrests. Oftentimes they are released on bond and we have to arrest them several times again before they appear in court. This isn't the fault of the solicitor's office or the courts or anyone else, it's just overcrowding of the system. The courts are so backlogged that if a defendant wants a jury trial, presently it takes just about 1 year for him to get a jury trial. In the meantime, the accused drug dealer is back out on the street and sometimes selling drugs again to pay for his attorney's fees or whatever.

And the offenders that get arrested for drug possession, they're not concerned about going to jail. That's just about the least of their worries. They're more concerned about losing their job, how they're going to pay for the attorney or maybe the forfeiture of the vehicle that they used. Instead of making it an inconvenience to get arrested for drug possession or drug dealing, we need to make it a punishment, because we have arrested some people here lately, and they have asked if we could come back at a later date because it just wasn't a good time for them to be arrested. It just goes to show you that they're not concerned about prison sentences.

I think that we need more solicitors to handle these cases, because I'm sure Mr. Condon has stated that his staff is just overworked. They have 300 to 400 cases each apiece to handle, and they can't handle those without more help. The court system is backlogged, also. They can't handle the extra people we arrest because there is no place to put them. They don't go to prison, so they put them on probation and then we arrest them again while they're out on probation.

We're currently in the process of applying for a grant through the Federal Government administered by the Governor's office to receive some more help in local law enforcement. What we would like to do is have these extra officers available to us so we can assist in other investigations. We work very closely with the DEA almost on a daily basis. They have been very good here in the Charleston area to us and it's evidenced by our seizures.

We have an aggressive seizure program here at the Charleston Police Department. We go after dealers any way we can. We'll take their assets, which include cash, boats, cars, any property, jewelry, anything like that, anything just to take it away from them if it's illegal gains. We just feel that there is more than one way to attack a problem. We'll try to drive the problem out of the area, but we also realize that—sometimes it goes into the county police, that's the only bad thing. But, we work closely with the Internal Revenue Service and dealers that we might not be able to get right away. We turn what we have over to the Internal Revenue Service in reference to assets that we know about and how they're employed and then they do investigations. From what we have learned, it's been very fruitful in that they have assessed over $220,000 in the last year off just tips that we have given them on the local drug dealers.

Our arrests have increased in cocaine deals in the last year of about 246 percent, which is 2½ times the amount of drug dealers that we arrested this year than we did last. That puts a big strain again on the solicitor's office because they must try these people. The only way that they can relieve their caseload is to plea bargain down, which we are usually against unless they cooperated in some way.

COURT BACKLOG

Senator HOLLINGS. That's a sad situation to have to plea bargain them down in order to clear the jail, Solicitor Condon, isn't it?

Solicitor CONDON. You are torn on a daily basis because on the one hand you got Charleston County Council, you got too many people in jail. I go over there and I am berated because somehow I'm responsible for them being in jail. Then you are dealing with the local law enforcement, rightfully so, that want appropriate bonds set, and the magistrate is caught in between. So you're right, it's a difficult situation.

I sincerely believe that the public will pay for law enforcement and jails. Somehow you mention the Kansas City referendum. I often thought if we put a referendum in Charleston County, another bit of tax increase to go directly for law enforcement, I think it would pass overwhelmingly, but it's tough galvanizing these forces, it really is.

Senator HOLLINGS. The first assistant solicitor, Gedney Howe and I roomed together when we went up to the legislature. Back then, we had to depend on the solicitor to draft bills. They ran the endorsing department. I put in the bill that instituted what we now call the legislative counsel. But before that, back in 1948 and 1949, we had the solicitors up there, they would draft the bills. Many times we would meet them up there and they would have to try to empty the jail out on Monday when they got a general sessions court opening. So I'd just volunteer and help take the pleas. I got in one with Nat Cabell and convicted his client of rape. He took me to the Supreme Court, but we still won it. Then we put in the bill for the first assistant solicitor, and that's how we got it. So we knew then about that backup.

It really is a problem when you get backed up for 1 year, as you say, Sergeant Vance. It takes 1 whole year to get to a jury trial, and that allows for more sales and more drugs and everything else, for the defendants to get more money to pay more lawyers and more bonds, and it's just a constant. You save money if you can accelerate and get the prosecutors, the assistant solicitors, the courts. We actually need more courtrooms in certain parts of the State. I guess around here, too. With the courts here, I don't know up in north Charleston—are you presently now in the Summerall Building or where are you now?

Solicitor **CONDON**. We're in north Charleston, the Office of Naval Engineering Command Center. You're right, in Charleston County, which is one of the largest counties in the State, population 300,000 people, there are only two resident circuit judges for civil and criminal. There is a bill pending in the general assembly to add another job. You almost got an hourglass shaped system. You got a lot of money now going into prison construction, law enforcement. My way of thinking they're doing a very, very good job of apprehending these people, but all of this has to go through the hourglass and the court system, there seems to be some reluctance to put more money into prosecutors and judges and courtrooms.

Senator **HOLLINGS**. They say it's to promote some lawyers in the legislature and that to give them a job and that kind of thing. But, there is really a tremendous need.

FOREIGN SUPPRESSION

Law enforcement, Lieutenant Oliver, you're talking about turning off that spigot. It's very interesting to hear, from this vantage point, to hear the local law enforcement officers asking for education. You're right on target. There isn't any question about it. If we close down Colombia tomorrow, they bring the drugs in through what we call the Golden Triangle.

I have been through it all. We burned the poppy fields in Turkey. We have destroyed the laboratories in Marseille, France. Went down to Bolivia, went down to Peru, Ecuador, into Mexico, and Colombia. You try to get in the Golden Triangle. I went up there with DEA and said, "Let's go in it." They said, "Wait a minute, Senator, you can't go in." I said. "What do you mean?" They said, "They got their own armies and everything else, you'd get killed."

Upper Thailand, Burma, and Laos, they operate totally on their own and everything else like that. So the best thing is to catch them at the checkpoint, like the Port of Bangkok coming down through Thailand. But we're not orchestrating and organized at the Federal level. We want to get a Coast Guard officer in there. Coast Guard is doing a good job. Put him in the port for 1 year, he can tell you every drug ship that is leaving and when it's going to leave and he will know everybody operating. With that information we can follow that ship and get it. I mean, right now I know where every Soviet vessel is in the world. We keep count of them and follow them. We don't know where any of the war-on-drug vessels are, but we could easily learn. But the State Department says we have too big an Embassy in Bangkok, we don't want a Coast Guard officer. Those are the kinds of things at the Federal level that we keep struggling with.

PROCESSING SEIZED ASSETS

So it's not easy to close off that spigot. On the handling of seized assets, you find good experience with the marshal's office, I take it? I know we're doing better than Customs. You know Customs turns it over to a contractor and it's like delivering lettuce by way of a rabbit. That's the end of it. We're making money by the U.S. Marshal's Service handling your seizures, asset sales, and everything else of that kind. We had the U.S. marshal testify up in Columbia, along with the DEA, the U.S. attorney, and the FBI.

The mandatory sentencing, you say, Lieutenant Oliver, we ought to change that now?

Lieutenant OLIVER. No, sir; we need the mandatory sentencing on trafficking to stay. But, we also need mandatory sentencing on possession with intent to distribute.

COMMUNITY INVOLVEMENT

Senator HOLLINGS. Umm-hmm. I am fully aware of the outstanding job done by Crime Stoppers. This Drop-a-Dime Program in the black community, are you familiar with that?

Lieutenant OLIVER. Yes, sir.

Senator HOLLINGS. That seems to be working and really bringing in cases.

Lieutenant OLIVER. We also found, too, if law enforcement officers in general get to know some of the people in the community, not the whole area, just a few people, it has an impact. For instance, Union Heights, you have better luck getting information from them if they know you personally than if it's a pick-up-the-phone and call you, calling the Metro Squad. They know you. You have a better chance of them picking up the phone and calling and giving information about John Jones who is standing on the corner.

Senator HOLLINGS. Right. You got to know your community, no doubt about that.

EDUCATION

Is there anything else you want to add here, because I have got some notes already made on some of the things that you all mentioned, but it seems to be more manpower and money again and education.

Lieutenant OLIVER. Education.

Chief SEXTON. Education.

Senator HOLLINGS. Well nobody's smoking now just about. It took a whole generation for all of us to learn. We're going to have to learn how damaging drugs are to your health and overall well-being. When we use the expression about the menace of drugs and the misery it causes, the only trouble is that with drugs, it makes you feel like a king they tell me. In other words, one has to hit skid row and lose their job and family and everything else before they seek help and treatment.

Lieutenant **Oliver**. But you feel good.

DRUG OF CHOICE

Senator **Hollings**. We never had such a thing. We now have 400 and some on SLED, with all the personnel. When I was Governor, we had 32 and never heard of a drug case. Now they tell me crack use is almost epidemic. Is crack use and related crime out of control? And the seaport here in Charleston, they're in the low country area, are they still on cocaine or some other drug?

Lieutenant **Oliver**. I believe it's mostly cocaine. We see some crack coming, but I wouldn't consider it to be an up and growing thing.

Solicitor **Condon**. In the rural communities, for some reason Berkeley County, which is part of my circuit, we have a real crack problem there and it's very disconcerting because it's relatively cheap. When you take crack you tend to be violent. So in the outer reaches, some nice communities, St. Stephens, Bonneau, going over to Cross, they're operating crack houses. Right now, we're in the process of targeting those areas, but for some reason it has hit the rural areas of South Carolina. I don't know why we have it in Berkeley County.

Senator **Hollings**. Berkeley County hasn't changed. What about the marijuana? They tell me they have to use the National Guard now during the harvest season, if there is such a thing.

Solicitor **Condon**. That's the other thing. For some reason in Berkeley County we have it growing fairly regularly. We are in the process of developing some strategies with the Governor's RAID team and that is a very good group. Don't necessarily want to discuss the details, but for some reason we do have some rural parts of that county where marijuana's the annual cash crop and it's there. We intend to do something about it sooner than later, but there are some local problems to deal with up there.

VIOLENT CRIME

On a related topic, I think one thing that should be pointed out, I know you're quite aware of this, but the sad thing about the drug problem is the fact that not only do you have people hurting themselves with the drug use, which may be their own choice, but in prosecuting general criminal cases, almost invariably violent crimes, robberies, burglaries, house breakings, these people are either committing these crimes while on drugs or committing them to obtain money to buy drugs. So it is the sort of thing that if we could solve the drug problem, the spinoff effects would be felt throughout the law enforcement system and criminal justice system. If you look at the money spent in drug law enforcement, it will save money across the board.

Senator **Hollings**. No doubt. I understand from testimony thus far, that 80 percent of the crime in South Carolina is drug related. Otherwise in Richland Memorial, we found in Columbia, 10 percent of the babies born are addicts from addicted mothers. And we are going to hear even further medical testimony this afternoon that is going to substantiate that. Can you imagine bringing in to this world all the babies that are already drug addicts and society is going to pay for it?

Solicitor **Condon**. That's a horrible problem.

JAIL SPACE

Senator **Hollings**. I know that we need jail space. Charleston County is going to get $500,000 for additional bed space in the county jail to house Federal prisoners, but we got to do even more. We have a Federal prison finally being constructed down in Estill, and they're looking at another one in this State. Sergeant Vance, we had an interesting article in the New York Times, "Weapon In Drug War: Imagination," by Andrew H. Malcolm. I don't know whether you saw that, but we want to put that in the record. It factually records what all you're doing over there at the city.

Solicitor **Condon**. Yes, sir.

Senator **Hollings**. It's an outstanding program, and the article will be inserted at this point.

[The article follows:]

[From the New York Times, Feb. 2, 1990]

WEAPONS IN DRUG WAR: IMAGINATION

(By Andrew H. Malcolm)

CHARLESTON, S.C., Jan. 26—A police radio crackled, "Go! Go! Go!" and two police cars converged on a man in a white hat in one of the city's highest-crime areas. He started to run, saw the other car and froze.

"Evening," said Officer Willie Robinson, leaping from the first car. "Put your hands on the wall, please. Here, I'll take that can of beer. Don't you know drinking on the street is against the law?"

Officers Robinson and David Young frisked the man and a nearby friend. A small crowd gathered "Hey!" shouted one woman. "What you messing with my brother for?"

"Calm down," said Officer Robinson, "I'll show you in a minute." When he finished the search, he turned to the crowd. "Watch this," he said like a magician. He emptied the can of beer on the pavement and out fell a syringe. A few people gasped.

"That's why we're messing with your brother," he said. "He's doing dope. And it's rotting your family and your whole neighborhood." Officer Young held the man's arms up for all to see the tracks of countless punctures.

NEEDLE KICKED INTO GUTTER

The officers ostentatiously broke the needle on the pavement and kicked it into the gutter. Then Mr. Robinson turned to the man in the white hat. The officer, muscles straining at his shirtsleeves, pointed at the man for all to see. "We're going to be watching you," he said loudly.

The officers spent the next five minutes chatting amiably with other pedestrians, reminding them that the officers would be around every night, sometime. Then they got in their cars and seemed to drive away. But within two minutes they swept around the corner again on the other side of the street where, during their first encounter, they had seen another man drop something in a pile of trash. They found a tiny packet of cocaine.

"We could have taken that guy in," said Officer Robinson, a 29-year-old an ex-military policeman. "But now he's out there doing our work for us, telling everyone how we knew he had a needle hidden in his beer can. Fact is, I didn't. But they don't know that."

The two officers are half of the Charleston Police Department's Flying Squad, four men picked by Chief Reuben Greenberg for their muscular builds and their initiative as uniformed commandoes to strike some fear into the hearts of drug dealers and users and maybe spark a flicker of hope in the minds of intimidated residents.

REVOLUTION BORN OF FRUSTRATION

More broadly, Officers Young and Robinson and their partners Adolfo Cofino and Joe Gabe are part of a quiet revolution in the last two years among many urban American police departments, a revolution born out of frustration with fighting an endless war on drugs in a legal system where suspects, arrested and sent to overcrowded jails, reappear on the street almost before the arrest paperwork is complete.

This new strategy of psychology, intimidation and imagination is part of a broader police management movement, the community policing movement, to regard at least some officers less as simple respondents to 911 calls and more as innovative social problem-solvers working out of the police department to eliminate underlying crime problems much as an old-time beat patrolman drew on schools, storekeepers and neighbors to maintain social order on his block.

In Tulsa, Okla., for example, five two-person teams of foot-patrol officers are assigned to apartment complexes infested with drugs and are freed from answering routine calls. Over the weeks they get to know the residents. They act as positive role models for children, coaching some in Boy Scout troops and steering others to the Police Department's summer camp on a ranch confiscated from a drug dealer. And the patrols develop tipsters among residents.

In San Diego and Fort Lauderdale, Fla., teams of police officers, firefighters and building inspectors focus on troubled buildings and complexes for strict health and zoning inspections, eliminating nests of drug dealers through eviction or by boarding up the structures.

In Tampa, Fla., officers and concerned residents stand on notorious drug corners sipping coffee, socializing and making dealers and would-be buyers uncomfortable.

Darrel Stephens, executive director of the Police Executive Research Forum, an organization of large-city police executives, said, "Departments of all sizes are approaching the problem now more from a broader perspective, developing imaginative, tailored responses to local problems instead of just arresting everyone in sight."

AIM: MORE ORDERLY NEIGHBORHOOD

At the very least such tactics disrupt criminal patterns, which can thrive in an atmosphere of official inattention and fear, by forcing activities like blatant drug dealing indoors or into other areas. At best they can help create a more orderly neighborhood, freer of intimidation, where urban decay is stalled or turned back.

"Look," said Chief Greenberg of Charleston, "it's amazingly simple. The bad guys are running a drug business. They depend on sales and profit. We try to destroy their business. And I think we're having some impact."

So occasionally he will station a Flying Squad member near a corner where a suspected drug dealer is selling. The uniformed officer chats with passers-by and may even smile and wave to slowing drivers who, in shock, speed up right past the dealer. If the dealer moves down the block, so, not coincidentally, does the officer.

If the dealer begins selling from inside a building, the officer sits on the stoop, greeting everyone entering and leaving. "It's amazing," Officer Young said, "how hot drugs get in your pocket when you see a cop in uniform."

Anyone who runs creates suspicion, or legal probable cause, and is chased. Flying Squad members must be under 30. The uniform includes special running shoes. They proudly keep chase statistics; at last count 97 chases produced 93 apprehensions.

"Just like the butcher," Chief Greenberg said, "a drug dealer depends on location of his business. He can only move so far before customers lose track of him or he moves into someone else's turf and gets into a different kind of trouble."

"SEE WE'RE AROUND A LOT"

And part of the Flying Squad's assignment is psychological encouragement for law-abiding citizens. "They don't say much publicly," said Officer Robinson, his eyes moving constantly as he walks through a pool parlor so everyone can see he is on duty again. "But they see we're around a lot."

When a dealer abandons one corner, city crews come in behind, removing trash and graffiti. Another Flying Squad member may station himself by the pay phones, often used by dealers to take drug orders. The officer answers the phones, takes the orders and passes the information on to regular narcotics officers.

After Flying Squad members arrested a suspected drug dealer on another charge, a narcotics officer called the pay phones himself and asked for the dealer.

"They just busted him," a man's voice whispered.

"Did he have any stuff on him?" the officer asked.

"Nah," the man replied, "I got it here."

"Good," said the undercover officer, "I want some real bad. I'll be over later."

WEAPONS

Senator HOLLINGS. Is there something anyone on the panel wishes to add?

Sergeant VANCE. I would like to say something about the weapons part. We have a problem with more and more sophisticated weapons, along with Lieutenant Oliver. Currently I have one of my men out on sick leave right now, he was arresting a drug dealer and the drug dealer pulled a gun on him, a 9 millimeter automatic pistol. The officer ended up breaking his hand making the arrest of the person. Right now we don't have any State law that would enhance the prosecution of that, so we'd have to take that to the Federal level right now.

In regards to seizures, we are working closely with the solicitor's office now more so than we have in the past. We are in the process of sharing moneys with them on some seizures. If they cooperate and assist in our investigation, we have established a fund that they use when we give them moneys that were seized. So I think that's working out very well.

Senator HOLLINGS. We in the South Carolina delegation believe police powers belong to the State. So, in general, control of weaponry, we always said it's at the State level. Are you telling me that we need further State regulations?

Sergeant VANCE. Yes, sir; I think so.

Senator HOLLINGS. Have you brought it up at the law enforcement legislature up in Columbia? Is that an issue? Has anybody got a bill in and so forth on these semiautomatic weapons or any others? In other words, the President has been criticized, said look, you cut out the imports, but how about domestic manufacture and use. He said that's at the State level and within their jurisdiction, but we don't even raise it at the State level. Very interesting.

PREPARED STATEMENT

Well, we appreciate hearing from each of you this morning. I think it's been an excellent presentation and we'll move then to the next panel. Thank you. Thank you very much.

[The statement follows:]

STATEMENT OF RICHARD A. VANCE

Like many other cities around the State and around the Country, the City of Charleston has a problem with illegal drug usage and sales. Although our problem may not be as serious as in other parts of the country, it concerns the Charleston Police Department greatly. Any use or sale of illegal drugs, no matter how small, even if for only so called "recreational use", cannot be tolerated if we are to make gains in the war on drugs. The Charleston Police Department is actively involved at all levels in the fight against drugs. These efforts include the education of our children against the ill effects of drugs, the arrests of those who possess even small amounts of drugs, and the arrests of those who sell drugs at all levels.

The year 1989 was one in which the Charleston Police Department made sizable increases in amounts of drugs and assets seized. Although arrests for marijuana declined from 413 in 1988 to 357 in 1989, arrests for cocaine increased by 37 percent, from 131 to 180. The most dramatic increase from 1988 to 1989 in the cocaine category was that the arrests for distribution rose 176 percent and trafficking rose 246 percent.

At this time, crack cocaine does not pose a significant problem in the City of Charleston. Information gathered through arrest data and informants indicates that the use and sale of crack cocaine is not on the increase. Arrests for crack have remained at less than half a dozen per year. Arrests in other categories of drugs remained fairly constant from 1988 to 1989. Arrests for methamphetamine, MDEA, MDMA, LSD, and hashish have totaled less than three each. It is evident from these statistics that cocaine is fast becoming the drug of choice in the City of Charleston.

The Charleston Police Department presently has five officers devoted full time to conduct narcotic investigations. These officers conduct all types of investigations, from surveillance of street dealers to long term investigations of major suppliers. The investigations are often time consuming and limit the officer to the number of cases he or she can investigate. In order to increase our capability of conducting drug investigations, we applied for and received a grant that partially funded one officer and some equipment in 1988. This grant was funded by the Anti-Drug Abuse Act, administered through the Governor's Office, Division of Public Safety Programs. The extra manpower and equipment has been of great assistance in our department's fight against drugs. We are currently in the process of applying for another grant, funded by the Anti-Drug Abuse Act of 1988, to increase our drug fighting efforts. However, delays in federal funds actually reaching us hamper enforcement efforts. Although the deadline for application of grants is February 26, 1990, the Governor's Office has stated the earliest moneys will be available in June, 1990. Assuming these funds are awarded, this three and possibly four month delay in receiving these funds will put a strain on our enforcement efforts. We need to attack the problem right now, not wait and let the problem get bigger.

One of the most frustrating problems facing the Charleston Police Department is how offenders are handled after their arrest. Often times they are released on bond and arrested several times again before they appear in court. This is due to the overcrowding of the court and prison systems. Courts are so backlogged that if a defendant wants a jury trial, it may be a year or more before the case is heard. In the meantime, the accused drug dealer is back on the street, usually selling drugs again, sometimes to pay for his attorney's fees. The offenders that get arrested for drug possession are not concerned about receiving prison sentences, but of other sanctions. These include loss of employment upon conviction, payment of attorney's fees, and forfeiture of their vehicles used in their crimes. Instead of making it an inconvenience to get arrested for drugs, we need to make it punishment. We need to make prison sentences a reality for these offenders.

STATEMENT OF RANDOLPH MURDAUGH III, SOLICITOR, FOURTEENTH CIRCUIT, STATE OF SOUTH CAROLINA

Senator HOLLINGS. We appreciate the panel coming in. We were asked about the value of these hearings. At a hearing up in Washington earlier this year, we learned about the chemicals that go into the manufacture of cocaine. Six formative chemicals. The principal one being methyl ethyl ketone [MEK]. Ninety percent of the chemicals shipped out of the United States down into Latin America falls into the hands of the drug lords enabling them to manufacture the drugs. We have passed a chemical diversion bill but it's not shared in by many countries. President Bush's visit to Colombia tomorrow, at the higher level, is very important. I hope he can get all the countries to sign an international agreement in regard to the shipment of these chemicals. Once we stopped the chemicals from coming out of the United States, they started shipping them from The Netherlands. We stop it there, they'll ship it from another point. There are international producers, so that's why we need a comprehensive international agreement.

We have before us now Chief John M. Lloyd of Surfside Beach Police Department; Sheriff J.C. Woodberry, Dorchester County; Solicitor Randolph Murdaugh of which circuit?

Mr. MURDAUGH. Fourteenth.

Senator HOLLINGS. Fourteenth Division Circuit. And Sheriff Michael Carter of Georgetown. Solicitor Murdaugh, we welcome you and we're delighted to hear from you.

Mr. MURDAUGH. Thank you, Senator. I know you have heard from a group of people over the last 3 days, and I guess probably I'm going to be the one talking for the rural communities. My judicial circuit is comprised of five counties, all of them, with the exception perhaps of Beaufort, being extremely rural communities.

This circuit is a unique circuit. We have within the fourteenth judicial circuit three of the six coastal counties. We have a number of major river systems, approximately 2,000 miles within the fourteenth circuit. Three major sounds that are on the Atlantic coast. We have 83 miles of I-95, which is the drug highway in the United States. We have three major military installations within the circuit: The Parris Island Marine Corps recruit depo, the "S" station in Beaufort, and the hospital, naval hospital. In addition, we have Hilton Head Island, Edisto Beach, Fripp Island, Hunting Island State Park. We have a resident population of 180,000 people in those five counties. We swell to over 5 million people during the summer months. Those are the things that are causing our problem. Our problem, sir, frankly is an increased caseload.

I became the solicitor for the fourteenth circuit in January 1987. The year prior to that, my father was acting as solicitor, there were 2,416 cases that we processed through our circuit in 1986. This past year, 1989, we processed almost 6,000 cases. There has been an increase of more than 50 percent in total caseload. But the amazing statistics, sir, are the drug statistics. In 1986, the year before I took office, we processed through the five counties 259 drug cases. This past year, we processed 1,778 drug cases through the court system. That's an increase of almost 700 percent, sir.

The type of drugs used was another statistic that probably is of interest. In 1986, 84 percent of our drug cases were marijuana; 8 percent were cocaine-based drugs. Now the cocaine-based drugs are the drug of choice of the people in my area. They comprise 76 percent of all the drug cases that we have on the rosters now that are processed through court. The drug that probably is giving us the most problem is crack cocaine.

Crack cocaine, sir, is an inexpensive drug, it's the drug of choice right now in the low-income black community. We have noticed in the last 12 to 14 months that it is beginning to spill over into the white community, sir. Crack cocaine, people will do things on crack cocaine, sir, that they would not dream of doing straight. They will steal, cheat, rob, lie, do anything to satisfy that craving. It's probably the most addictive drug, so I have been informed, that we have in our area now. My understanding is that after one dose of crack cocaine, you are addicted.

To give you an example, sir, and to brag a little bit, too, of how bad the drug situation is, in 1987, when I assumed the office of solicitor, I obtained some of your drug funds through Governor Campbell's office. We have funded three undercover agents to work these five counties. It was the solicitor's task force against drugs. We were able to hire three people to do that work, sir. During the first year of operation, the program was designed to aid and assist the rural areas with enforcement. We, in the first year of operations, made 1,039 cases—sales cases—buying drugs against 908 people. That gives you an example, sir, of how bad it is. The rural counties do not have sufficient law enforcement personnel to properly operate.

Hampton County, which is my home county, we have six deputies. They cannot work drug cases. Every time they start working a drug case, Frank, Beech, Maryanne, they have to go and answer a domestic call. Well a drug investigation is probably the most complicated type of investigation you can run. They cannot do it. We get an awful lot of help from Governor Campbell's RAID team that he has established, but they got 46 other counties to go to. We need help, that's what it really boils down to, sir.

The rural areas are probably the most hurt of any group. Beaufort County, by way of example, they have sufficient personnel, they can operate drug investigations. Hampton, Allendale, Jasper, and Colleton Counties, frankly, cannot handle investigations for drugs. There are not enough resources, they cannot afford the people that are needed and the type resident population that we have are prime pickings for the people selling crack cocaine.

As I said, that is our problem. That's the problem, sir. The answer, I don't know that I have got a good answer for you. I do not frankly think that we will solve the drug problem through enforcement. We can catch everybody in the world, but there is so much money involved in it, when we catch somebody that is running a crack operation in Estill, SC, 2 weeks later somebody else has moved in because of the amount of money that is available to them being in that operation.

I am a firm believer that the only way to solve the drug problem is through an intensive education program, sir. I was talking with several of the people prior to this hearing and they were telling me about some program that they have for the schools. My counties can't afford to do that, sir. As I said, we have six deputies in Hampton County, they can't assign one deputy. We have seven schools, including the grammar schools and high schools in the county, they can't afford to give one person to those counties to educate them. It's got to come from somewhere else.

There are a couple of other areas that I would like to talk with you about, sir. It is my understanding that there is a move afoot to increase the matching funds or drug funds to 50 percent. The drug program that I had for my circuit, sir, was only a 25-percent match. We could not have done it on a 50-percent match. That program did not cost the taxpayer one penny. Every cent of match funds that we used for that program, sir, came from confiscation and forfeitures, but we couldn't have funded 50 percent from it, sir. I would hope that you will take a strong look at that, sir, and not raise it to 50 percent.

Another area, sir, is the training of law enforcement. And again I'm talking about the rural areas. Perhaps you can make some money available for the academy so we can have some schooling, because what time they do have to work on drugs they'll know what to do. Perhaps that schooling could not only be at the academy, but through the academy down to the local level, sir. Again, with the lack of personnel that we have, it's hard to send a man to Columbia for 2 weeks, or 6 weeks, or 8 weeks. But if you could have somebody come there and perhaps give them some schooling. We try to do it, but we're in court so much that we just frankly don't have the opportunity to do it. Again, I'm talking about in the small counties, sir. It's different in Beaufort County. Those are the areas that we need help in, sir.

FEDERAL/STATE MATCH

Senator HOLLINGS. The 75/25 percent match we put back in the bill. The administration, as you indicated, wanted a 50/50 percent and they made the same proposal in this year's budget but we're not going to go along with it. Everyone is tugging at each and every program in order to save a little money here or there. That's not a real saving. It cuts off and actually you save money on that maximum grant program just through your own seizures, so it's sort of self-financing.

Mr. MURDAUGH. Yes, sir.

Senator HOLLINGS. What you're saying, Solicitor Murdaugh, is that a drug dealer, trafficker, or otherwise, realizes just exactly what you testify to. It's easy to operate in your area than in perhaps downtown Charleston or Beaufort because you are understaffed and everything else. And that begins then to exacerbate the problem. Right in the rural areas. We find that that is where they move and try to operate from, the rural areas. And then the law enforcement is not only limited, but are easily identifiable.

Mr. MURDAUGH. That's correct.

Senator HOLLINGS. How do you get undercover, how do you get a sting, everybody knows everybody. You see a stranger out there, you are not going to deal, you know what I mean. It's just tough all the way around and you only have six deputies?

Mr. MURDAUGH. In Hampton County, yes, sir.

UTILIZATION OF NEW RESOURCES

Senator HOLLINGS. The schooling is valuable testimony also, because I'm trying to measure it on a limited basis. If I have got money for 50 extra personnel, or 46, because we got 46 counties. Do I give an additional officer to each county, or do I have a team of 46 to 50 additional DEA agents trained with expertise and everything else in a geographic fashion coordinated to go in and help? Do you know what I mean?

Mr. MURDAUGH. Yes, sir.

Senator HOLLINGS. I'm trying to find a better way to use limited funds.

Mr. MURDAUGH. Senator, it would be my opinion, sir, that if you were to add one personnel to the county law enforcement, they would not be utilized for the training. There is such a demand for personnel, I'm afraid they would get to the point where they would be answering the domestic calls and burglary calls.

Senator **Hollings**. You had the biggest bust, I think, and Sheriff Woodberry, he is going to speak, and before he gets through I saw you had another one yesterday.

Sheriff **Woodberry**. Yes, sir.

Senator **Hollings**. In Hilton Head, where you wouldn't expect operations right out of there. Where, was it prosecuted on the Federal level?

Mr. **Murdaugh**. It was prosecuted on the Federal level. The case was made on Hilton Head Island, Spanish Wells area, Brams Point.

Senator **Hollings**. I see. And now they bought a helicopter you're talking about with the money?

Mr. **Murdaugh**. That's correct.

EDUCATION

Senator **Hollings**. It's working at that local level. It's interesting that you stated education as a priority in our war on drugs. Coming from law enforcement, that isn't the natural tendency people would expect. But, what you're saying is in the real long run, the only way that we're going to solve this drug problem is through education. You have been at the solicitor's job and as assistant solicitor over some 20 years?

Mr. **Murdaugh**. Since 1964, yes, sir.

Senator **Hollings**. Yes, sir; 25 years. That 25 years experience, at every level, local, State, and otherwise, Federal level, rural area as well as a populous area down in Beaufort and what have you, and you feel education is the real answer.

Mr. **Murdaugh**. That is my opinion, yes, sir. I have seen, when we closed down an operation in one place, within a matter of days or weeks, it is opened back up, sir. You know, I know when I graduated from college, society used to think that it was bad for people that weren't married to live together, and nobody did it. Now society has changed and everybody is doing it. When our society gets a belly full of drugs, and I don't know at what point that is, sir, they are going to cut out drugs. We're not going to do it through putting people in jail. We can speed up their opinions by education, sir.

RURAL NEEDS

Senator **Hollings**. There is no doubt about it. That's about the only way that we will get on top of this problem, because it's universal. But the rural county point is well taken, because that's where the need is. And the larger metropolitan areas, and living in the crime capital of the world, so many feel that all the killings, that's all you hear in the early morning news in the District of Columbia, all drug related. They think that's what you have to do is put all the money down there and everything else of that kind, but you're hamstrung out in the rural areas, too.

How about the production of marijuana, have you had any increase in that?

Mr. **Murdaugh**. We have had a domestic increase, yes, sir. The total usage of marijuana has declined over the years, but there is a domestic growth now. We probably have had six fields that have been busted in our circuit. And almost the thing was unknown 5 years ago.

Senator **Hollings**. You haven't caught up to Berkeley County yet?

Mr. **Murdaugh**. No, sir; no, sir.

PREPARED STATEMENT

Senator **Hollings**. Very good. We will place your statement in the record at this point.

[The statement follows:]

Statement of Randolph Murdaugh III

It is a pleasure for me to appear before this committee. The area of your investigation is one of vital importance to me personally and as the prosecuting attorney for the 14th Judicial Circuit.

My Judicial Circuit encompasses three of the six coastal counties located in South Carolina. We have over 2,000 miles of navigable rivers, including the Savannah, the Broad River, the Edisto and the Cumbahee, all of which empty into three major sounds, located on the Atlantic Coast, these being the Calibogue, the Port Royal, and the St. Helena. These geographical features combined with other areas of which I will address later are causing havoc with the drug problem.

We additionally have I-95 running a distance of eighty-three miles through the center of the Circuit and a large tourist industry at such places as Hilton Head, Fripp Island, Hunting Island and Edisto Beach. These areas swell the transient population to over five million people.

We also have three major military installations in the circuit. These are the Paris Island Marine Recruit Depot, the Beaufort Naval Air Station and the Naval Hospital.

Last year, the 14th Judicial Circuit, with a caseload has also increased. This overall increase is a direct result of the drug problem. People who commit crimes while on drugs and those who steal to satisfy a drug habit are examples. An informal survey which I have conducted leads me to believe that over 75 percent of all cases on my docket are drug related. This is a problem of epic proportions.

If I may, I would like to give you an example of exactly how bad the drug problem is in the area. In 1987, when I assumed the position of Solicitor, I obtained a grant from Governor Campbell's office enabling me to form a multi-jurisdictional task force to aid local law enforcement in making drug buys. With three undercover agents, we made one thousand and thirty-four drug buys in the first year of operation, these cases were made against 908 different people. We confiscated approximately 25 automobiles, and a large amount of cash.

Based upon information received by this Task Force and given to Federal Agents, a crack distribution system located out of state as well as a cocaine distribution operation working between Florida and North Carolina have been broken up.

This Task Force worked as well as it did because they were aiding law enforcement in rural areas where there is a resident population of approximately 180,000 persons, processed almost 5,000 indictments. This is an increase of over 50 percent in the three years I have served as Solicitor.

To show how dramatic this increase has been, a comparison should be made between 1986 and this past year, 1989. In 1986, there were a total of 259 drug cases processed through the Court System. By 1989 this number had increased to 1,778 cases or an increase of over 691 percent.

Cocaine based drugs are the drug of choice in this area. While marijuana cases comprised 84 percent of all drug cases in 1986, that figure had dropped to approximately 16 percent by 1989. Cocaine based drugs increased from approximately 8 percent of all drug cases in 1986 to 76 percent in 1989.

Crack cocaine is the drug which is causing the most problems in my area. It is a drug which is the choice of the low income, black community. We see it now spilling over into the white community. It is highly addictive and most importantly, inexpensive.

While drug cases themselves have increased, we have an overall lack of resources and officers to meet the need. For example, there are only forty-one members of the Sheriff Departments in four of the counties in the 14th circuit. These officers cannot keep up with ordinary crime much less work involved drug investigations.

One other problem area is that of prosecutorial services. Many State and Federal dollars have been forwarded into enforcement and into the judiciary. This has helped somewhat with the drug problem by increasing the cases made and by giving us more court time, but it has also caused a bottleneck on the Solicitor's Office. We do not have enough assistants to handle the additional case load in court nor do we have sufficient staff to handle the forfeitures and confiscations created by drug cases. At present, I am aware, of no program available for local prosecutors to receive Federal money to assist them in their duties.

I have identified the problem, but I have not given you a solution to the problem. I do not believe that a solution can be had through enforcement. Through enforcement, we can slow the tide of drugs, but we cannot solve it. It is my opinion that the solution will only come when the general population gets its belly full and takes a stand against those who deal in drugs.

This stand will come sooner or later, regardless of what we do. We can cause the change to speed up through education. Much needs to be explained to the general populace about the dangers of drugs. This education should start in the grammar schools and progress through all segments or society. They do not see the problems in their everyday lives as do those of us who deal with dealers and their victims.

STATEMENT OF J.C. WOODBERRY, SHERIFF, DORCHESTER COUNTY

Senator HOLLINGS. Sheriff Woodberry.

Sheriff WOODBERRY. Senator, it's nice of you to have me here in front of you. I assume you want to hear my problems, but I got more than you want to listen to, I'm sure.

Senator HOLLINGS. That's what we want to make a record on here.

Sheriff WOODBERRY. We do have a drug problem in Dorchester County and have had for many years. I took office January 3, 1989, and since that time I'll just bring you up to date on some of the things that we have done. We have taken in approximately 6 million dollars' worth of drugs, street value, 12 vehicles, $54 million in money, and it's a never ending thing. We only got five officers. We could probably use 30. They're overworked, underpaid, and I'm having to pull them back, they just can't work 8 hours a day, 7 days a week.

The cocaine and crack right now are probably the worst drugs that we have in our county. Mostly crack. Probably a little bit cheaper for them to get hold of and it's more dangerous than cocaine. I have got probably five of the best officers I've ever seen put together in 1 year. And they are dedicated, but we desperately need help.

Senator HOLLINGS. Are you talking about the entire Dorchester County?

Sheriff WOODBERRY. Drug agents.

Senator HOLLINGS. Yes.

Sheriff WOODBERRY. I got 43 officers, but I have taken 5 out of the uniform division to create a drug office. And out of them we probably have got the most progressive five men that you ever found in one group of that size. They're really good, but we need communication from other departments. Berkeley County has helped us quite a bit and Charleston County has helped us and SLED has helped us at times and DEA, and it's going to take all of that. You have got to have an intelligent group. Somebody that can help people together where we can tap information at other counties. We don't stop at county lines. We go across county lines and then turn it over to whoever the arresting officers or authorities in another county. We've been in Colleton County, we have been into Charleston and Berkeley. Through their help we have done quite a job in 1 year.

The way we're going right now, if we had 15 men, we could run 85 percent of the drug dealers out of our county. But we're not doing justice to your surrounding counties. We're running big time dealers out of Dorchester County. Chief Greenberg made a statement while I was in his office that he was going to run the dealers into Dorchester County. I'm reversing that. I'm putting them back on them. He is a good friend of mine, but I want him to share part of this problem. It goes down to the Federal help. We do apparently need Federal help, and anything above a 25-percent match, we could never afford it. I agree with that. Our council can't create money that they don't have. They are willing to do whatever we ask them within reason, but it's going to have to come from Washington for us to be able to combat drugs.

I disagree that you can totally resolve this in a schoolhouse. I don't think that will happen. I think you still got to keep them and your force, they're going to have to work to deteriorate your dealers. In a sense, if you go strictly to schooling, and putting these people through to not use drugs, what's going to happen to the people that are already involved who just want to get the big money out of it. They're there and they are going to stay there. Just like the solicitor says, one dose of crack, you're addicted. And once you're addicted you're going to stay with it. So if anybody is weak enough, if a man can touch him and get him to use this stuff, once, maybe three times, the sale is there and your need.

That supply and demand and greed is what has brought all of this into our world right now. I think that with the help of the Federal Government, with the equipment, more funds that could be brought in, if it's possible, that we could do a much better job. But I still say that you need a course that we can depend on. Somebody we can communicate with and trace people all the way to Washington instead of just Georgetown or Myrtle Beach. We need to computerize the criminal activity. That's one thing that we do apparently need to do in our county. To do that, we need the help of other counties. Sheriff Carter got on the computer, he called me up, we can get him the history of where he was acting and who he was and everything that was done in your county, especially if he knew that he was in his county to live, that would put him way ahead of the other man. That's the kind of man. To do that we're going to have to join forces. And to join forces we are going to need your help. That's financially with equipment and other personnel.

Here are some things that I jotted down that I feel that probably could help us is grants. Federal grants is one thing that we do apparently need, but the paperwork on Federal grants is so demanding that the average person that you have in your office can't handle this, you need attorneys. The big cities and big counties are into the grant business and they're suffering and doing well with it simply because they have somebody with that ability. We got people that are capable of doing that, but we got other duties. Just can't take their time to do it. That has hurt us quite a bit.

In this county alone we have had three grants issued to us, to my knowledge, in 10 years and maybe even 20 years. Nobody ever applied or nobody ever wanted to open the books up, but it's a new world. My books are wide open to everybody and I'm willing to answer to paperwork, but you cannot take a street officer and send him to Columbia to write grants. He just doesn't know how to prepare the paperwork. That's one of the things that we're going to have to have.

We don't have anybody to help us with that. The solicitor in our district just does not perform them. He would rather nol-pros a case or not fill out the paperwork than for us to succeed in what we're doing. And 1 full year, to my knowledge, on record we have won two cases in our circuit court. The rest of them are either nol-prossed, still on the docket or the dealer pled. A guilty plea to me is nothing but good law enforcement. That's all it is. You either get it through the courts with law enforcement or you get it with lesser penalties. The lesser penalties to me just does not take drug kings off the street.

Equipment, we have very little. When I went in there, we had nothing. We're trying to improve that. We definitely need grants to improve that. So far we have gotten one small grant.

CORRECTIONS FACILITIES

Some people say why build more jails. And I'm hearing my friend right here, he will tell you, don't, putting them in jail is not the answer, but I would much rather put a hard criminal or drug dealer in jail than have him living in your house. That's essentially what he is going to do, living in Washington, living in your house.

Federal equipment could be administered around to where if we could get our hands on it, it would be an assistance to us. And that's the chain of communication from county to county and from State to State right on to Washington would really help us in this drug war.

The drug business doesn't only fit your low-income people, it goes into lawyers, doctors, dentists, engineers. When it gets into people that have got that kind of money, they're reaping a big profit out of it because they can afford this trafficking. If they can get to your solicitors and the judicial system, we're not solving a thing in this world. And that's what's happening in our county right now one way or another. Plea bargaining by drug users should be cut out. Mandatory sentence, that nobody can get in there and cut it. Suspended driver's license for anyone convicted of a drug offense, that ought to be mandatory. It ought to be publicized and mandatory.

The one thing that I think will turn the tide for us is joining forces, putting mandatory sentences on your criminal users and dealers. If you mandate something, nobody else can change, they got to fail. But if a man goes in to our courts knowing that he can get in there and plea bargain and be back on the street with just $500. I'm driving a Cadillac right now that came out of Charleston, and under the seat was $20,000 when we got it. Didn't upset those people. They are not worried about it. Money had a scent of mold on it. Been buried somewhere. And $20,000 in a new Cadillac doesn't hurt the drug dealers.

We're pleading to you for your support. I have known you for probably ever since you have been where you are at, and I know you always help us. I even built your house, and now I am asking you to return that favor.

Senator **Hollings**. Thank you.

[The information follows:]

LETTER FROM J.C. WOODBERRY

From: J. C. Woodberry, Sheriff, Dorchester County

To: Senator Ernest F. Hollings, Chairman, Subcommittee on
Commerce, Justice, State, the Judiciary

Subj: Testimony for oversight hearing to be conducted on
February 14, 1990

Ref: your letter EFH: dsb of 24 January 1990

Encl:
1. Dorchester County Sheriff's office, Profile of a Crack House
2. Interface between Drug Enforcement and Alcohol and Drug Treatment in Dorchester County
3. News article enclosures from the local media

Dear Senator Hollings,

In accordance with your letter, I have given considerable thought to our drug enforcement unit and why we were so successful initially. Although we obviously have considerable work ahead, I am confident that our tactics are sound.

I have divided my testimony into five basic areas of discussion as the letter indicates. Through new ideas and innovation, we regularly change not only our overall strategy, but our street tactics, otherwise the illegal drug community becomes wise to our methods.

I hope the enclosed ideas are a contribution to your Sub committee's oversight hearing, and as your constituents, we appreciate your efforts in trying to provide assistance.

Sincerely,

J. C. Woodberry
Sheriff, Dorchester County

INTRODUCTION

1. The drug epidemic in Dorchester County is as pervasive and dangerous as the recent hurricane of 21 September 1989. It has wrecked lives, careers, broken homes, invaded our schools, incited numerous crimes, corrupted citizens of every social and economic level, and in some measure infected every corner of our public and private lives. It has become a national scandal that our county has to deal with. "If we seem powerless to stop it, it is because so many of us are willing to spend the money and break the law to sustain what has become, by government estimate, a $110 billion-a-year drug habit. We have met the enemy, and he is us!"[1]

2. Our prominent county communities: Summerville, St. George, Ridgeville, Reevesville, etc. used to be primarily quiet rural, typically southern conservative folks that were untouched with national dilemmas. We provided a stable environment to raise a family, educate our children, and run our businesses. Now that cocaine, crack, crank, heroine, and marijuana have invaded our society, we have lost that rural small town innocence. Kids today have become street-smart early because of their time spent on the street unsupervised. Peer pressure, boredom,

[1] Newsweek Magazine: June 16, 1986, "The Plague Amoung Us."

lack of supervision and self-esteem; whatever the reason, has led many individuals to feel that drugs are the only way out and the only viable alternative.

3. Fighting drugs by holding well publicized drug raids will never work as a solution. Many of the individuals arrested make bail and are back on the street within 24 hours.

4. The drug problem in Dorchester County had festered for years prior to my election 13 months ago. What I see is a problem that is quickly becoming a part of our social fabric, a part of our communities very existence.

5. As Sheriff, I had to come up with a plan to deter and possibly in the future eradicate drugs within my jurisdiction. I realize that the drug plague has no easy solution. It will require hard work, manpower, material assets, and primarily dedication and commitment. I will not be a proponent of those well-publicized raids that will solve nothing!

DRUG ENFORCEMENT TACTICS

Upon assuming the responsibility as Sheriff of Dorchester County, I quickly realized that due to neglect in the past, our drug problem has reached epidemic proportions. We had to act fast. I hired a drug division head and two agents immediately and started to formulate our plan. Although our tactics changes frequently, I will give an overview of our general plan:

1. Dorchester County's D~~e~~il~~i~~emma With no narcotics unit in the past, we had no intelligence, so new agents started without an intelligence base. This increased the difficulty of the job, but we soon created our own intelligence and informants, and we now have a substantial number of both.

2. Initial efforts I immediately opened our county to all state, local, and federal agencies. This was a "closed county" in the past. Mutual cooperation is one of the keys to success. Intelligence efforts must cross-jurisdictional boundaries, and mutual trust between agencies is important. SLED, FBI, CUSTOMS, DEA, and IRS are all important tools in drug enforcement. We hold quarterly intelligence meetings to share information. We immediately applied for federal and state assistance in the form of grants. This helped alleviate the shortfall in equipment and personnel.

3. Basic Tactics It became evident that our efforts were an "attack from all directions" approach. By prioritizing our targets we wanted to hit the sponsors, dealers, sellers, and users. With a mixed county of rural and urban population we would concentrate our agents in the urban areas and ask the SLED RAID TEAMS to work the rural areas. We wanted to create the idea of no "safe havens" for the drug community. If we do not have enough intelligence to arrest a known dealer, we will turn his name over to IRS. Somehow, we want to deter and confuse them all, giving them the idea of mistrust and disorganization. There have been many arguments on who to target - the dealer or the user. We do our best to arrest both. A crime watch coalition has been firmly established and the population is beginning to understand that they must help police themselves.

4. Problems Encountered In the rural areas, it is difficult to penetrate the loyalties that exist with the population. It takes an extra effort on the part of our agents. I-26 and I-95 both go through our county and they are main arteries north and south for drug traffic. With the number of agents verses the population, we cannot concentrate on this problem yet. We must convince not only the population but our governing body that an acute drug problem exists. We need not only the support of the people but the support of the lawmakers within the county.

5. An Effective Drug Unit I quickly learned that a good drug unit requires a strong leader and dedicated no-nonsense agents. We must enforce the law, and still protect the rights of our citizens. A drug enforcement unit is potentially volatile without supervision and mature leadership.

   A drug agent must possess the discipline and maturity to work alone, create and follow through with his own cases, and at the same time deal with the temptations that confront him. Narcotics agents work long hours on the street, and administratively we need to relieve the burden.

6. Future Plans In the future we will computerize the whole department with the assistance of a federal grant. Computerization will complete our intelligence efforts and afford agents a complete picture of drug organization within the county.

   We will continue to interface alcohol and drug treatment with law enforcement as the enclosure indicates. Although we must prosecute drug offenders, we must also at some point return them to society as responsible citizens.

   This year we will introduce the D.A.R.E. Program within our schools. Although slogans such as "Just Say No" help, we must begin at home and continue through the schools and the community. We want to relieve the "peer pressure" threat.

   Our crime watch coalition must continue to be emphasized. I have published in the local papers a "crack house" profile so the public can report any homes that fit this description. I am convinced that neighborhoods can police themselves with our assistance.

   We continue to change our tactics to confuse offenders. We are in the process of purchasing a drug dog to assist us in locating the drugs. We use Air National Guard assets in the spring and summer to locate marijuana fields. I have requested two more agents in my budget for the next fiscal year. I want to commence policing the interstates as soon as possible.

   Through asset seizures and forfeitures, we will continue to build our drug division. I want drug dealers to realize that we will take everything they have if possible. We want to remove the cash incentive that dominates the whole drug business.

   We will use the media and press to let our population know that the drug business is no longer profitable in Dorchester County. I want the public to have an accurate picture of the threat that faces us.

   In conclusion, we will constantly study the problem to understand the drug threat and the opponent's tactics. We will be innovative and continue to use every asset available to eliminate the threat within Dorchester County.

LEGALIZATION

1. As a result of the "Opium War" of 1839-42, China floundered in the bloody strife of civil war and foreign invasion for almost four decades. History has recorded a sad cycle: the great civilizations fell by their own inner weakness before their military forces were ever vanquished, and if we as a nation ever succumb, here to it will have been by our own hand.

2. My observations and feelings over the past months of the drug "crowd" have been with mixed emotion: sad, perplexed , amazed, and angered to name a few. Although I don't want to deemphasize alcohol abuse, we are dealing now with a whole new family of addictive drugs. For example, when smoked cocaine molecules reach the brain in less than 10 seconds; the resulting euphoric high is followed by crushing depression. The

cycle of ups and downs reinforces the craving and, according to many experts, can produce a powerful chemical dependency within two weeks. A typical heroin addict "shoots up" once or twice a day while crack addicts need another hit within minutes. Now that "ICE" has become a threat to our state, we have a whole new additional problem. Worse than crack, it is a new form of speed that throws your brain off the chart; also threatening your circulation, heart, and blood pressure. Ice's real threat comes because no drug that you can eat, smoke, snort or shoot does as many bad things to your body as speed.

3. I mention these drugs because I firmly believe that legalization of any drugs is absurd. I have seen mothers that would turn their children over to DSS (Department of Social Services) rather than turn in their dealer. With the drugs we have on the street today, even the maternal instinct of motherhood is lost because of a powerful craving addiction. The last thing we need in a society that is competing worldwide for its survival in trade is a euphoric do-nothing work force!

4. I realize that legalization is a popular alternative, but I also know why. It is cheap and easy! Yes, it will cost the taxpayers a lot of money to prosecute drug dealers and users, build more jails, hire more judges and narcotics agents, but we must realize that it will still be a lot cheaper to spend the money than tolerate the debasing of American society. In conclusion, legalization is not a viable alternative.

FEDERAL ASSISTANCE FOR LOCAL NEEDS

With the acute drug problem Dorchester County must deal with, we are obviously in need of federal and state assistance. Our "attack from all directions approach" will work with federal aid as well. In my opinion, there is no one area of concentration that will solve the problem. Listed below are my recommendations:

1. Grants - We will continue with federal grants allocated to the states. Although I realize checks and balances are necessary, simplify the procedures or grants will become an overwhelming administrative burden.

2. Personnel - With a county population of 90,000 citizens, we need more than 6 agents. Even with an ultimate objective of a 10 man narcotics unit, we will be hard pressed to eradicate drugs.

3. Forfeitures and Seizures - There should continue to be a fair split between federal, state, and local agencies. This encourages mutual cooperation.

4. Judicial Assistance - The solicitors office is grossly in arrears within our district. To assist us in meeting court demands and providing timely justice, we need more judges to meet the needs of the system.

5. Equipment - We are still in need of more equipment for surveillance and detection. This includes additional automobiles, observation devices, weapons, ammunition, uniforms, etc.

6. Intelligence - With federal assistance, we need a national and statewide central intelligence network. With interstate highways and a coastline to patrol, South Carolina cannot provide the necessary intelligence alone.

7. Correctional Facilities - With an increase in convictions, we need facilities to house drug criminals. This may be considered on the federal or state level, depending upon the crime.

8. Surplus Federal Equipment - Surplus military or federal law enforcement equipment could be made available to state and local agencies. This would alleviate a wasteful duplication of effort.

9. Assistance with Informants - Various counties are providing "reward" money for initiating successful drug cases. We could use federal assistance with that effort.

10. Harsh Laws for the Drug Criminal - We should enact laws that make illegal drug use and trafficking unattractive. I recommend the following:

    a. Licensed professionals - lawyers, doctors, dentists, engineers - should have their license revoked if they are convicted of possessing, selling, or trafficking in illegal drugs.

    b. End plea bargaining by drug users.

    c. Suspend state and federal aid benefits from persons convicted of drug possession, sales, or trafficking.

    d. Suspend driver's license for anyone convicted of a drug offense.

    e. Review and possibly increase mandentory sentencing.

CONCLUSION

1. Our statistics are abstract, but the consequences are frightening. This nation, by some accounts, has become the most drug-ridden society in the industrial world. The dealers have overrun our lines of defense. "It's lonely out there," a narcotics officer told us, combat weary from the laws of supply and demand. "The plague is a 25 billion-a-year drain on our national wealth; some analysts believe it is why we have lost so much of our edge to the Japanese"[2]

2. I cannot say my narcotics agents are winning the war against drugs in Dorchester County. In many ways we have become a domestic Vietnam. County dope dealers operate like guerilla insurgents and makes a tremendously difficult target for my deputies.

3. Even William Bennett said in an exclusive Kinght-Ridder interview, "I'm mad, I'm frustrated, I'm concerned about the leadership - some of the people who say they speak for Americans, be it at the state or federal level are going to lose interest in this." This was only two months after the Bush Administration declared a new war against drugs. Even more disturbing, Bennett was concerned that the country's leaders "lacked the will, the patience - and maybe the stomach to fight the battle against drugs."

4. As I stated before, there are no simple "quick-fix" solutions to the drug war, and any county sheriff that attempts a quick victory will become frustrated and defeated. I am willing and dedicated to a struggle of hard work, innovation and dedication. I realize I cannot win alone, so I will solicit the help of our citizens and any other resource available.

5. Initially, I plan to deter drugs in my county as I have done this past year, but my ultimate goal is either eradication or drive the drug community elsewhere. Another Vietnam analogy concerns me more than my first one. We lost that war not on the battlefield, but at home due to lack of national resolve. I can assure you we citizens and law enforcement agencies in Dorchester County do not lack resolve. We will fight not only for ourselves, but for our children so they won't be bothered by the dealers, pushers, and users that have plagued this county for years. We owe that struggle to them and we will see to it!

FROM: DORCHESTER COUNTY SHERIFF'S OFFICE

TO: Citizens of Dorchester County

SUBJECT: Profile of a crack house

Fellow Citizens"

I have listed below a profile of what we have determined to be typical of a neighborhood drug distribution point or in street terms, a "crack house":

1. Frequent traffic at all hours with stops of short duration, normally 3 to 10 minutes.
2. Out of state tags or strange individuals not typical or familiar in the neighborhood.
3. Run down or undept premises.
4. Children neglected and unattended.
5. Windows in house and garage shaded or with curtains/blinds always drawn. Reinforced doors.
6. Tenants/owners at home during all hours with no apparent job or means of support.
7. Assets far excell expected income such as cars, jewelry, pools, collectible, etc.

Obviously, all indicators may not be there, but if you are suspicious, please five us a call at 873-5150 and ask for narcotics. I can promise you that your name or involvement will be kept confidential. We cannot solve our drug problem without your help.

Thanking you in advance,

J.C. Woodberry, Sheriff

Interface Between Drug Enforcement And Alcohol And Drug Treatment In Dorchester County

Purpose

1. To provide alternatives to the traditional arrest and prosecutorial procedures of the Criminal Justice System in Dorchester County.
2. We recognize that 80% of those individuals arrested are using substances at the time of the commission of the crime; therefore, it is crucial that these individuals be identified and introduced to rehabilitative options early once entering the criminal justice system. Many of these individuals suffer from a chronic and progressive illness called "addictions".
3. Those individuals under the influence of substances act and behave in ways that they would not normally do without substances. Therefore, criminal behavior may not be chronic and progressive, once the individual is exposed to rehabilitative options.
4. Jails and prisons do not rehabilitate. More than 60% of those leaving the jails and prisons will continue to commit crime. In Dorchester County

those who enter an Alcohol and Drug rehabilitative alternative called Pre-Trial Intervention are given alcohol and drug treatment of those that successfully complete PTI (approximately 75% of those who enter, based on court records from 1983 to 1990), less than 2% of thse individuals will be arrested again in this county.

5. There is value in the "punitive" process associated with criminal activity. This is not "lost" in the PTI programs. Clients are made to perform 50 hours of community service, receive regular urine screens, participate in individual, family and specialized group therapy, tour a "scared straight" program at the state prison for men and /or women, and pay restitution to the arresting law enforcement agency.

6. Both Drug Enforcement and the Pre-Trial Program are committed to the ideal that certain alcohol and drug arrests (particularily 1st offenders) are more effectively and efficiently dealt with in using a rehabilitation model.

7. These options relieve the state of a significant financial burden, benefits the community and exposes the individual to rehabilitative options not offered elsewhere.

Procedural Recommendations

1. That Drug Enforcement and the Pre-Trial coordinator will meet bi-weekly to staff and screen those alcohol and drug arrests that would be appropriate for Pre-Trial diversion.

2. That a list of those individuals who are selected for participation in Pre-trial Intervention be forwarded to the Solicitors Office for approval prior to admission.

3. In recognizing the value of early intervention, once the arrest is made, frequent communication between the Solicitor, Drug Enforcement and the Pre-Trial Intervention Coordinator will exist to expedite a person's entrance into Pre-Trial Intervention.

4. Staff development inservices will be held regularly to coordinate and educate both agencies' staff as to each others needs and problems and to promote an effective working relationship.

5. Once entered, and at the bi-monthly meeting between Drug Enforcement and Pre-Trial Intervention, a written summary of a persons progress through the Pre-Trial Intervention program will be presented and that person will be "staffed" to ensure that progress is being reached toward rehabilitative goals.

EX-MARINE JOINS DIFFERENT WAR FIGHTING DRUGS IN DORCHESTER

(By Edward C. Fennell)

A former commander of Marine Corps fighting units in Southeast Asia is taking on a new and possibly even more difficult war: fighting drugs.

As the head of the Dorchester County Sheriff's Department's first drug enforcement unit, former Marine Lt. Col. James H. Davis is bringing leatherneck toughness and resolve to his new combat arena. But the combat veteran says he has seen effects of drug abuse that make him cry.

A Charleston native, Davis served 21 years with the Marine Corps—the last three as commander of the Marine Barracks at Charleston Naval Weapons Station. He was a commander of ground assault forces in Vietnam in 1968 and 1969, and in May 1975 led a rifle company during a military raid into a Cambodian island to free the hostage crew of the U.S. merchant ship Mayaguez.

Davis said he had no previous law enforcement experience when Sheriff J.C. Woodberry asked him to head the narcotics squad. He took the job in January.

"I hadn't even considered law enforcement when I retired last year. I started to get involved in real estate, but decided to do what I can for the county."

He said he hopes to combine the training he received at the state Criminal Justice Academy and his military background into new methods of thwarting drugs.

Attacking on many fronts and frequently shifting the tactics to be used against drug dealers "will keep them a little spooky," Davis hopes. He also plans to use the latest technology including computers, to keep close tabs on people suspected of drug violations.

Davis said he is building an information-gathering system that includes informants and citizen-supplied tips. Letters have been sent to other law enforcement agencies inviting their cooperation in investigations and giving other agencies permission to pursue drug suspects into Dorchester County, he said.

The four-man drug enforcement unit is funded in part by federal grants and fees paid by drug suspects participating in the Pretrial Intervention Program. The unit has vehicles confiscated from drug dealers, and confiscations of property and cash are expected to play a big part in the unit's future. Davis said.

"We want to take the money they have and turn it against them to ram it right back down their throats," he said.

All this week, Davis and Woodberry have been burning mounds of marijuana plants officers yanked up from fields scattered throughout the county. Davis and other officers rode horseback through some of the more remote wooded areas to find and carry out the 1,500 pounds of the plants that have been destroyed.

Just as in Vietnam, the sound of whirling helicopter blades could sometimes be heard by Davis as he made his way through thick vegetation. The choppers, provided by the S.C. Army National Guard, are working with the officers in locating pot fields.

There are other similarities between the Vietnam war and current efforts to combat drugs, Davis said.

"We lost in Vietnam because of a lack of national resolve. The only way we can lose the drug war is through a lack of national resolve," he said.

"People have to back up. We can't win without support of our people and our county council. We need officers, prosecutors and judges who will do their jobs," he said.

Mostly rural Dorchester County can be a dangerous place for a narcotics officer, said the veteran of many missions into the jungles of Southeast Asia.

"Drugs are changing pastoral, rural America. I look at it and I see it as almost threatening, knowing I can't cover it all.

"To see the countryside I as a Southerner was always so proud of degenerate because of drugs is disturbing," he added.

As did those who fought in Vietnam, those who fight against drugs see things that sicken them, Davis said.

"Once I got on the job, I saw what drugs are doing to people and their kids. I was shocked.

"When the parents are hooked, the kids really suffer. They are neglected at best or abused. Drugs are destroying the family network, and we are raising a subculture of kids who will condone drugs because their parents used and dealt them," he said.

"Houses where people use drugs are nasty. There's no indication that a whole lot is going on in their except making enough money to buy drugs."

Davis said he's seen indications that children were forced to serve as prostitutes by parents needing drug money. He also sadly recalled a drug raid at the home of a parent of "a little blond girl who was in the third grade. She was in a program for the gifted, and there she was sleeping on the floor, with roaches crawling all over her."

Another time, Davis said, a woman who was holding her 5-year-old boy tried to swallow a large amount of cocaine when confronted by officers.

"I had to get that dope out of her mouth with that child screaming. She could have died. I had tears in my eyes not for her but for that child."

Later, he said, the boy begged him not to put his mother in jail.

"What are you going to say? I had to sit down and tell him who is the villian without degrading his mother."

[From the News and Courier, Tues. Aug. 8, 1989]

$500,000 Drug Cache Taken in Summerville

(By Arlie Porter)

Dorchester County Sheriff's Department and Summerville police confiscated a half-million dollars worth of drugs early Saturday morning in a raid on a Summerville home.

Also taken were 18 firearms of assorted types and calibers, mostly hunting rifles; a late-model Lincoln Continental; and a pickup truck.

Kenneth McCray, 34, of Summerville; Robert Mitchum, 41, of Ladson; and Patricia Mitchum, 42, of Ladson, were charged with trafficking in cocaine and possession of methamphetamine, or "crank" with intent to distribute.

Dorchester County Magistrate Charlene Snowden on Monday set bail for each at $500,000. All three were in Dorchester County Jail Monday night, a deputy said.

Several more suspects are being sought, Dorchester Lt. James H. Davis said Monday.

The drugs were found at a home at 100 Hickory Lane. Confiscated was about 460 grams of cocaine, about two pounds of crank, two ounces of marijuana, and seven cases of drug paraphernalia, Davis said.

The paraphernalia had a street value of about $7,000, he said.

The arrests occurred as a result of intelligence-gathering efforts by the county drug enforcement unit and the Summerville police department, Davis said.

The raid involved eight officers, four from each department, Davis said. There was no resistance, he said, adding, "It was a 'door-kicker'."

[From the Summerville Journal-Scene]

DRUG WAR NEEDS MORE TROOPS

(By Jim Bailey)

A war can't be waged without troops, but that is what Dorchester County was trying to do, said Jim Davis recently.

Davis heads the new Dorchester County Sheriff's Department Narcotics Unit.

"Not one dime had been earmarked for narcotics investigations in this county before Sheriff Woodberry took office," Davis said. "We've had to build this squad from the ground up."

Davis, who is a retired Marine Corps Lt. Colonel, said he had little experience in law enforcement before coming to work for Woodberry this year.

"But having been a Marine for over 20 years, I am a very mission oriented person," he said. "J.C. Woodberry asked me if I'd be interested in building a narcotics unit." And since I have deep respect for him, and since I plan to settle here and raise a family, I thought that would be a good mission to take on."

The unit has already taken shape, with the hiring of a number of agents and the acquisition of a $42,000 grant from the State to help finance equipment to be used by the squad.

Davis and his men have entered mutual aid agreements with Berkeley and Charleston Counties, and with the Town of Summerville in order to allow drug officers to move more freely between boundaries and facilitate arrests.

His men have already been responsible for, or assisted in several major drug seizures and arrests within the last several months.

Davis is also enlisting community support.

"The more help we have from the people, the more chance of success we will have," he said. "People can get involved by giving us information."

Although he said that the problem of drugs in Dorchester County is very widescale, he said that it is a battle worth fighting.

"I'm not a defeatist," he said.

[From the Summerville Journal-Scene, Fri., June 9, 1989]

KIDS ARE VICTIMIZED BY DRUG-TAKING PARENTS

(By Jim Bailey)

He's the chief narcotics agent for Dorchester County, but Jim Davis doesn't want to discuss drugs. He wants to talk about kids.

Davis is married and has children. He says being a father has changed his perspective about a lot of things in life—things like drugs.

"That's the most depressing part about this job and the best argument against drugs," he said. "Having to look at the kids, knowing how having parents on drugs affects them."

He opens a drawer in his desk and pulls out a pair of wallet-sized school photos. On them are the faces of two blond-haired, teenage girls. Pretty, bright looking girls.

"Their mother was prostituting them to get drug money," said Davis, a Methodist minister's son who spent 21 years in the Marine Corps.

As an officer, Davis got some training in narcotics investigation. He augmented that training with a stint at the S.C. Criminal Justice Academy.

If asked, he'll talk about his training; he'll talk about building a narcotics squad from scratch in a department that had never earmarked $1 for drug enforcement; he'll talk about the loyalty he gives to the sheriff and the unerring fidelity he demands from his men.

But the conversation somehow always comes back to children.

He tells about raiding one house and finding a dirty, elementary school boy sleeping on the floor because he had no bed. Money that could have been spent on the child had been used for dope, he said.

"I did some checking," says Davis. "The kid was in the gifted and talented program at his school. What's going to happen to him?"

He tells about another raid in which his chief concern was not the man that had been arrested, but making sure there were no guns in the house.

"The guy's son was so upset that I was scared he might try to kill himself," he says.

Davis has been at work less than six months now, and his stockpile of such tales seems almost without end.

"Here are all these beautiful kids that you just wish you could adopt, and you have to bust into their homes in the middle of the night and carry off their parents," he says. "It just terrifies them. And it breaks you heart."

But even that isn't the worst part, he says.

"The sad part is that most of these same kids will grow up to become users and dealers themselves," he said. "The drug users of today are breeding a whole new generation. It's a terrible cycle."

FEDERAL/STATE COORDINATION

Senator HOLLINGS. I need you back out there at my house. We'll recess this hearing, because I'm out of it right now, and it will be May before I get back in, but I need you there. Hugo got me.

On the matter of actually bringing the cases and everything else like that, I discern, of course, a lack of maybe coordination and so forth. Does DEA at the Federal level work with you pretty well?

Sheriff WOODBERRY. We have gotten, I would say, good service out of DEA. They got some good people and they have done real well, but they're undermanned. You can talk to them and it's got to be something real big or you just can't get them. A lot of times we have to run down just small cases to get to your big ones.

Senator HOLLINGS. Umm-hmm.

Sheriff WOODBERRY. And your rural areas, we may work a case 3 weeks, just one case, and not get anything out of it. But in the towns like Summerville, it's much easier for us to work. The surveillance is better in a heavily populated place where they don't know who you are and it makes it easier for us.

Senator HOLLINGS. It's a well taken point with respect to the matter of paperwork. I have heard that now in three hearings already in the State this week that the bureaucracy and involvement in trying to fill out those applications and what have you, it's just overwhelming and just defeating. In other words, like you say, don't even bother to try and do it.

On the equipment, have you used that surveillance vehicle with the night vision and so forth that we got? We only got two of them. Have you had occasion to use those yet in Dorchester?

Sheriff **Woodberry**. No, sir; we haven't used that at all. In the process I hope one day getting surveillance cameras, night scopes, and things that we can use there. We got some big time dealers in our county and we have been hitting them pretty hard. We made two or three big busts this week and we don't ever stop, it's just a matter of my people giving out, they're tired. And we have five people, the drug officer is not like an officer on the street, he can make a charge, write out a ticket, and deposit them in jail and go home and go to sleep. The drug agents can't do that. They're on call. I got one agent there, he'll answer as many as 100 calls a day. His phone bill runs $300 a month, but let me tell you since he has been in my county he has turned some drugs and brought in some assets for this county, too. He is probably as good as any is in the State, and I'll put him against anybody that I have ever seen. He is worth his money, but they can only take so much, that's all they can take.

FIRST CIRCUIT

Senator **Hollings**. What circuit are you in now, Sheriff Woodberry? Dorchester County, what circuit is that?

Sheriff **Woodberry**. First Circuit.

Senator **Hollings**. First. Ninth is Condon, I guess.

Solicitor **Murdaugh**. Yes, sir.

Senator **Hollings**. And who was got the first circuit?

Solicitor **Murdaugh**. Joe Mosel.

Sheriff **Woodberry**. We got problems and I don't like to get problems saying anything about public officials. Joe, I know he administers this and has to prosecute his cases, but his attorneys are just not any good. You can't even win DUI's, and a DUI is a matter of presenting facts on paper. When you're losing those, there is something dead wrong. He has won two cases in 1 year that was tried.

Senator **Hollings**. Well, of course, that is going to have to be corrected at the local level. We had that at the Federal level, frankly, and now we have got Bart Daniel in and there has been a dramatic increase in cases brought and prosecution made and everything else like that. Before Bart, we didn't have those who really are good going into the courtroom and to get down in the pits trying those cases. But that's going to be for you at the State level to work on.

The grants, we'll have to do something to computerize. You're not exchanging information with the DEA and everything else?

Sheriff **Woodberry**. We do. We do. Just on the small amount.

Senator **Hollings**. Yes.

Sheriff **Woodberry**. But we need to be able to get on the fax machine or get on a computer or something and let Washington know or New York or whatever, that John Doe left Dorchester County and supposedly is living in your area. His activity. That's the kind of thing that is going to help break it up. DEA has been real helpful to us, they have. They got good officers and I'm proud of them. They came into my county. They have helped me with a big bust. I don't have any problem with them, they are just understaffed, too.

STATEMENT OF MICHAEL R. CARTER, SHERIFF, GEORGETOWN COUNTY, GEORGETOWN, SC

Senator **HOLLINGS**. Sheriff Carter.

Sheriff **CARTER**. Senator, how are you?

Senator **HOLLINGS**. Welcome.

Sheriff **CARTER**. It's a pleasure.

Senator **HOLLINGS**. Incidentally, Sheriff Woodberry, you built an excellent home, because the first thing you do after a hurricane is run in and try to open all the windows and slide all the sliding doors and see if the closet doors all fit and everything like that, and they did. Water came up under the floor. You know how you put it.

Sheriff **WOODBERRY**. Yes, sir.

Senator **HOLLINGS**. Came right under there and the big deck outside the house in front, it went around the bedroom wall, came around and you can see how that big, heavy deck, and I guess the waves moved it, and that's why it needs fixing, but wasn't anything else damaged.

Sheriff **WOODBERRY**. That's a beautiful home. Probably one of the best that was ever built.

Senator **HOLLINGS**. Can I get you back over there.

Sheriff **WOODBERRY**. I'll have to come and visit you.

Senator **HOLLINGS**. I'll arrange it. I appreciate it. I got to find some drug fellows or something and you'll find them over there for me.

Sheriff **WOODBERRY**. If we can find them over there, Senator.

Senator **HOLLINGS**. What you and the solicitor said is actually it. You see my generation, I'm sure of that thing. You say you try it one time and you're gone. And you know young college kids and everything else, you know they'll try anything. Come down here to Surfside and Myrtle Beach and what have you, and it's not a moral degeneration in that sense almost, it's just being able to morally say no, which is good, and I advocate and support and everything like that, but there's a tremendous menace out there that is throughout our entire State and entire country. And in Georgetown, I take it?

Sheriff **CARTER**. Yes, sir; we have our problems down there, too. It's amazing how we moved from one problem to another through the years. I started out with SLED back in 1966 and made the first undercover heroin buy in the State of South Carolina back in 1967, I think it was. But during that time, that's primarily what my job was, was undercover work. That was before the ABC boards and before other kind of agencies came into it. We spent a lot of time with alcohol. Made 40 some liquor cases in 1 night right here in the city of Charleston back in the sixties. And that was to try to change the law or to make it more easily handled, liquor problems.

So what we do, we legalize liquor a little bit more. And did that take care of the problem? No, sir; it hasn't. We have just as many people drunk and wrecks on the road today from drunks as we had before, maybe even more than we had back then. But we moved up, we used to work gambling and prostitution and those kind of undercover cases. We don't work them anymore because we don't have the people to work those.

We, in an area such as Georgetown, say we have 47,000 people down there, I have 29 deputies that take care of everything. We run the courts and do all the civil process and do all the law enforcement and we take care of everything down in our area. And it takes more than what I have got just to serve most of the civil process papers, much less transporting mental patients to Columbia, which takes two people and all day to take care of that problem. We have had 70 or 80 of those last year.

So our problems are not just in the drug areas, the drug areas in Georgetown are not really beating the doors down, so I'm not getting the funding that I need from my council down there to address the drug problem. I do have seven investigators, but those seven investigators range from everything from all your breaking and entries to robberies to child abuse cases, which are on the increase also, to one investigator I have. I tell him to work 90 percent of his job on drug problems. But I find out he is not doing that because he is continuously working something else, work around to this.

The most successful way that we have to combat our problems we found in the past is that when I do have a turnover, as far as one of my deputies leaving me, then when I hire a local young fellow, then I put him on the street to buy dope before I put him in uniform so people know who he is. That has been very successful for us, that has helped, because that individual, he is known in the community, he is able to get in rapidly with his neighbors and people around him that is messing with dope. He made 50 some cases in just a short time. We would have wrapped his cases up a lot sooner, but my jail was full from another drug raid that he had just done, so I had to wait 1 month to get some court periods in there to remove some people out of the jail so I could go ahead and round up these other individuals to put them in jail.

What do we do with them after we put them in jail. We don't do anything with them. There is no mandatory counseling, there is no mandatory nothing. We put them in jail and then they negotiate with the court and they negotiate with the courts and solicitors, because the solicitor has got a docket that he can't move. He is mandated to move that docket. If he'd try every drug case with the mandatory 15 years sentence, we're going to be in court forever and not get rid of the cases that we got now. If you make mandatory sentences—and I am all for mandatory sentences, if the guy does something, let's put him in jail, but let's do something else with him after we get him in jail. Let's expose him somehow to something so when he is out on the street it's not a continuous swinging door that is in and out. He has learned to adjust to the jail time, so jail time is not a deterrent to him anymore. He has learned to adjust to that, and when he gets back on the street he ain't got a job, he ain't got nothing to do. So what does he do, he goes back where he made money before. The easiest occupation in the world is selling dope. People knock your door down to come and get it from you. It's such a profitable thing, and he can live high on the hog and then find he is back in jail again.

We arrest the same ones over and over and over. When I first moved to Georgetown as a SLED agent, one of the first cases was a heroin buy off a fellow there, and he is 60 some years old now and we're still putting him in jail for heroin. Smaller amounts. He is a user and not a pusher, but we pick him up for possession of heroin. It's a continuous cycle. Something has got to stop the cycle from moving as far as having the same ones over and over and over.

The smaller areas such as Georgetown, the agents of SLED and DEA, they can come and spend 1 day or 2 days and then they got to go somewhere else and come back and spend another day or two. And the only way they can operate is if you have an informant to operate with them. Who is the informer? The informer is the same buy that we caught last week for selling dope off or possession and all he is trying to do is play both sides of the fence. Satisfy you enough so you don't put him in jail, yet keep his friends that he was dealing with or his customers that he was selling to before, keep them happy. So he gives you a little bit. As he gives you a little bit, what does he do—he exposes that undercover agent. He is good for you just a little bit.

So informants are good to a certain degree, but if we rely totally on informants, we're not hitting where we need to go. The only way that we can get in rural areas with operations is through having individuals that could come and live in your community and be a part of the community. I know that when I first took over as sheriff, since I was with SLED, and they were gracious enough to send me a fellow and said he is yours, you can have him 2 or 3 months whatever it takes. We moved him into the community, set him up as a so-called school teacher. He moved in and he was just right in as a part of everything. So when you move them in and you try to bring them in on Thursday night and Saturday night and you run him in as a friend, knock on the door, "Hey, Joe, this is a friend of mine," sell him a little bit, you're not really getting to the problem.

If we're going to have personnel, you got some 46 people that you can bring into this area, my strong suggestion to you is to set up a pool where they can go and live in a community for awhile and see what's going on in that community and then especially in the small communities. In the big towns, yes. Like I said earlier, when we came to Charleston, we made 47 cases in 1 night. And Georgetown, 2 or 3 weeks to make five cases. They know each other. Everybody knows each other. It's going to take individuals coming in that have got the time that they can spend in that community, where they work, whatever they do, just get exposed and see what's going on. Of course, I got no intelligence. My deputies get their information. We gather that up and can try to help them, but maybe we're not always getting the right information. We need to be able to get in and actually find out what's going on, because the majority of our information is coming from rumors and/or informers. And informers ain't telling you everything. They tell you just enough to get themself out of a crack.

So personnel that could help us in smaller communities would be individuals that could come in and spend some time. Let them spend some time, let's see what they can do after they try that. If that doesn't work, then we can put an informer in, but we're going to blow it anyway as far as blowing their cover. Let's bring them in as bartenders, waitresses, or bring them in as school teachers or whatever and let them just be exposed to the community for awhile. And then we have solid evidence. When we go to court we have to have a person that is trained and gets up on the stand and testifies and can make that jury believe that I'm not just doing it because I have been caught myself, I'm trying it because it's my job and I have been trained, and we are going to win more cases than we are winning today.

We are losing cases today. They're thrown together. That's the only kind. We got to throw them together in a hurry to make as many as we can because we have to move on to something else. We had individuals that could come to Georgetown or Horry or whatever through some coordination through the local people, let them put them in the right direction, but after they get out there, let's find out if it's the right direction. Let them get a part of that community and see what's going on in that community.

PREPARED STATEMENT

Senator HOLLINGS. Thank you. We will insert your statement and then I have some questions.

[The statement follows:]

STATEMENT OF MICHAEL R. CARTER

PERSONNEL

Local government budgets generally place severe constraints on agencies ability or assign several full-time officers to drug enforcement efforts. Undercover investigations, surveillance programs, marijuana eradication programs, etc. require full-time, long-term commitment of several people. In many small agencies, the commitment of even 2 or 3 officers to these tasks represents a reduction of 10 percent or 20 percent of the work force. Federal funding of full-time narcotics teams would greatly benefit the local communities. Undercover personnel that can stay in a county for three or four months. In small counties everybody knows each other so it takes longer to get an undercover officer in position to buy drugs from pushers.

FACILITIES

The success of any undercover or surveillance operation is heavily dependent on covert activities. Both vehicles and personnel need to be indistinguishable from the general public. This type of activity is difficult in small towns where everybody knows everybody else and unmarked vehicles are quickly and permanently identified as police cars. Federal funds for establishing a pool of vehicles that could be exchanged and traded among several agencies would decrease the probability of identification. Other basic tools such as night vision equipment, video taping equipment, etc. that are not part of a "normal" budget in small communities are also needed.

Interdiction of drugs entering the local communities. Most counties, and particularly coastal counties, have numerous avenues for drug importation. Waterways such as bays, rivers, creeks, etc. offer easy and generally undetectable entry points. Marine patrols and surveillance activities are necessary on a continuous basis. Interstate highways, U.S. highways, and back roads are all used for drug trafficking in local jurisdictions. Once again, continuous monitoring of traffic for "drug profile" vehicles is necessary in any areas. Aerial reconnaissance and surveillance for drug cultivation activities is especially important in rural areas both during seasonal confiscation raids and throughout the growing season. Federal funding of these patrol and surveillance programs is necessary for small budgeted jurisdictions.

All of the above activities fall outside of the day-to-day activities that are common in small communities where the drug problem has not yet reached epidemic proportions. Local governing bodies are hard pressed to fund expensive, labor intensive activities unless the drug problem is perceived to be an immediate threat to the local society. Federal funding of these programs can help to maintain the problems at an enforceable level and prevent the establishment of complex, pervasive drug problems that may be insurmountable for small law enforcement agencies.

COURT BACKLOG

Senator **Hollings**. You haven't had any difficulty moving your cases through trial?

Sheriff **Carter**. We have due to the fact that we just have so many cases and the limited amount of court. We used to have court about double our court, and our solicitor, again this past week, asked for more court to dispose of cases. In Georgetown 10 years ago, we had 23 people population and now we're right at 100 average population.

Senator **Hollings**. When you say population, that's at the jail at Georgetown?

Sheriff **Carter**. Yes, sir.

TREATMENT FOR INMATES

Senator **Hollings**. Now we had, the day before yesterday, the department of corrections testify in Columbia. We've got some mandatory testing for drugs and treatment and we got the alcohol and drug abuse counseling working on those in the event, as you say, to cut out the revolving door, going back out on drugs and back in and everything of that kind. But there is no particular treatment or any kind of program, at least in the local jail at Georgetown with 100 folks in it?

Sheriff **Carter**. No, sir.

Senator **Hollings**. There is not.

Sheriff **Carter**. AA meetings and some counselors.

Senator **Hollings**. AA and counselors try, but no coordinated or concentrated program?

Sheriff **Carter**. Volunteer people.

Senator **Hollings**. Just volunteer?

Sheriff **Carter**. Yes, sir.

Senator **Hollings**. Would you think that that is typical, Sheriff? Is that correct, Solicitor?

Solicitor **Murdaugh**. Yes, sir.

Senator **Hollings**. That's about the way it is all over the State then. They are detained, on an average, before coming to trial and everything else like that, for 6 months?

Sheriff **Carter**. Yes, sir.

Senator **Hollings**. Or more maybe.

Sheriff **Carter**. More sometimes. We're supposed to dispose of them in 160 days at trial, but we get to most of it but not all of it, I guess.

Senator **Hollings**. You could definitely save money by getting more prosecutors and more courts and everything else and more assistants for the solicitors, because we're paying more in the long run. You know, that's what I said in my—during my hunger hearings, I said "It's cheaper to feed a child than to jail a man." And let's have them develop physically and what have you, cheaper for us to prosecute rather than incarcerate.

Sheriff **Carter**. Yes.

You got to realize, too, Senator, every time you add another solicitor or add another court schedule, that takes more deputies to secure that courtroom and transport those prisoners back and forth and serve all those subpoenas and stuff—you got to filter that down to the bottom a little bit, too, and that's where I feel we are.

Senator **Hollings**. You got a dozen extra more judges, you really got to embellish that all the way through with respect to the court facilities, the deputies, the marshals, the probation officers. Law enforcement is big business.

DEMAND REDUCTION

Sheriff **Carter**. I'm afraid so. I wish that we could do like the solicitor suggested over there. The implication is I think it should be one of the points of directions that we need to go in as far as trying to eradicate the problem. I don't necessarily think eradicating the problem is locking people up, but training people. Education. I don't know where you start. When a woman walks into a doctor's office and he says, yeah, you're pregnant, well the next stop is not necessarily running home and telling daddy, but the next step is sitting down and training people how to raise young people.

Senator **Hollings**. And if they're on drugs, trying to stop it, because I found in Richland Memorial, 10 percent of the children born there are already addicts from addictive mothers. I imagine we will find a similar situation here in Charleston this afternoon from the medical end. And we're going to hear from that group. The education has got to start right there in the doctor's office.

Now in the schools, that Drug Abuse Resistance Education Program, you don't have that, Solicitor Murdaugh, do you, in Hampton, I guess?

Solicitor **Murdaugh**. We do not have one in any of the five counties.

Senator **Hollings**. You don't have one in any of the five.

Solicitor **Murdaugh**. No.

Sheriff **Carter**. We do not have it in Georgetown.

Senator **Hollings**. You don't have it in Georgetown?

Sheriff **Carter**. We're looking at that program, but it takes people. We have five high schools in the county and it takes people to be in those schools. And that's wonderful, although I was raised in law enforcement back in the sixties when we were in the schools, and we were in the schools back in the sixties for the wrong reasons.

Senator **Hollings**. Yes.

Sheriff **Carter**. Back in the sixties I think a lot of young people missed a lot of education because they were sitting there looking at us in the schools and not doing what they should be doing in the classroom. And in the beginning I was sort of thinking a little earlier about putting police in the schools, but I have changed my mind a lot about that. I didn't think that I would ever drug test my own people, but I thought I would know my own people. I started that 3 years ago and I have been proven wrong twice where we found some drugs in my own people and I had to fire them. We're learning and growing, but maybe we're not learning enough and growing fast enough in the right direction.

That DARE Program is a good program. There will be funding for that. You got to take and train officers off the street and expose them to the young people to do what we should have been doing all the years long, and that's keeping that door of communication open between us and law enforcement and the young people today. And not just every time you walk down the street and mama tells you, "You behave or the sheriff's going to put you in jail," you know.

Senator HOLLINGS. Yes.

Sheriff CARTER. Why not bring the child over, meet the sheriff, and if you got problems he can work together.

Sheriff WOODBERRY. We have been going into our schools and now we have got officers that go around and have lunch with the kids. We try and work up through the sixth grade. I'm fully for the education, just as he said, but I think after sixth grade I think the education as far as drugs is concerned is out of your hands. But the DARE Program is a good program and we will work it, but in small counties it is just too hard for them to get in on it on account of getting the manpower, because once you obtain an officer for the DARE Program, that's all they do is they stay in the schoolhouse.

Senator HOLLINGS. We're really going to have to educate your generation and mine, that's our problem. We're the ones providing the money for the program, but we're not providing enough, I can tell you that right now. We're just hit-and-run drivers. We have been talking about drugs. You know all you got this day and age is pollster politicians. Everything that shows up in the poll the politicians try to do something to identify with that subject. And they just try but don't really get a concentrated, coordinated effort. Our generation has got to learn that this thing is way more devastating than we ever imagined. I've been listening and learning now for 20 years on this same subject.

Sheriff WOODBERRY. Most parents, you can help them then, but by the time they recognize, just like you're saying, it's too late then. You can't go back and wash that away. That child's already hooked.

Senator HOLLINGS. You sure got a task of it, Sheriff Carter.

STATEMENT OF JOHN M. LLOYD, CHIEF OF POLICE, SURFSIDE BEACH POLICE DEPARTMENT

Senator HOLLINGS. Chief Lloyd, glad to have you. I appreciate you being here.

Chief LLOYD. I have my comments directed on a small police department of less than 10 men, so I prepared a little talk. Having spent the first 20 years of my law enforcement career in a major metropolitan police department adjacent to Washington, DC, with manpower in excess of 1,000 officers, I retired in 1984 and accepted a command of eight officers at this police department. I now find I have the dubious honor of knowing firsthand just how drugs affect both large and small police agencies.

When asked to appear before this Senate subcommittee to give my comments on the effect of the drug epidemic on the small community police departments, the first idea that came to mind is of course manpower and equipment. Within most large agencies the resources are usually available. Further, court systems and jail facilities are usually used to a steady flow of drug cases, and although cramped, have the means to manage them. Large urban police agencies have special weapons assistance teams, spousal domestic officers, juvenile bureaus, police chaplains, and the list goes on, who may be called upon in times of need.

With smaller, local departments, these specially trained units, officers, and equipment are, for the most part, nonexistent. Of the 225 police agencies in South Carolina, 147 agencies have less than 10 officers. While that does not mean there is a lack of law enforcement, it does mean that most small departments have difficulty or are simply unable to cope with major problems that drugs can place on their meager resources. For example, the first indicators that drugs are beginning to be a problem is the escalation of minor crimes in a given area, petty larcenies, auto thefts, strong-arm robberies, and residential burglaries start to rise as drugs gain a foothold in the community. The seriousness of the crimes will increase. Murder, robbery, robberies of commercial establishments, drive-by shootings, and armed robberies of private residents will become commonplace. Any one of these crimes, coupled with the day-to-day auto accidents, lost children, and general police-related duties can overload the best small departments.

Once the drug problem gets to this point it quickly becomes out of control. Addiction to drugs will cause people to lose sight of reality. Work and family become unimportant to the drug dealer and to the addict. Family life, which is a lifeblood of any small community, will deteriorate. This leads to an increase in domestic-related calls. Drugs cause death, which must be investigated. For a small department one officer taken out of service means that there will be no one to patrol the business establishments or to render aid to traffic victims. Many times I hear citizens state "Why don't you do something about the selling of drugs." It is not an easy task and is something that cannot be done overnight. For example, a department receives a tip of a drug house where drugs are being sold. A police officer must first interview the complainant to find out just exactly what the complainant observed. If the complaint is verified, a stakeout is placed on the house and the times and dates are recorded, various subjects who visit the location. Several dates are recorded of the various subjects who visit the location. Several controlled buys will be attempted. If all of this is successful, a search warrant is applied for. After a warrant is obtained, a RAID team must be put together and time set to enter the house. Equipment such as shotguns, bullet-resistant vests, sledge hammers, and enough personnel to guard the front, sides, and back of the house needs to be gathered. All of these movements must be quickly made. Dealers have police scanners and are very aware of any other police in the local area.

Drug-related activities, the police must follow the narrow guidelines in order to prosecute the case and successfully prosecute them in court. However, the manpower and equipment needed to build the case in court may not be available. Drug locations have a way of multiplying if not investigated in their early stages. When this occurs the problems are compounded. You may ask yourself, "Why don't the small departments request help from the larger departments?" This may not be done for several reasons. First, most larger departments have their own priorities and the local community agency difficulties are not high on their agenda. Further, large departments are concerned with the major imported drugs into the area and drug kingpins. Certainly large departments will give aid to local agencies; however, quite often it does not come quick enough and the drug problem worsens.

One problem already touched on is that of poor equipment, and in some departments, nonexistent equipment. Police radios should have the capabilities to prevent any unauthorized listening. A recent case in point, a traffic stop was made on less than a desirable subject. When the auto was approached by the officer, he noticed a police scanner in the vehicle. The subject knew the officer's name and what area he was patrolling. The officer left that traffic stop with a rather uncomfortable feeling. Other expensive items such as body wires, night vision scopes that are used to investigate drug cases, small police agencies usually do not have the extra funds to obtain. Police agencies are guided by an annual budget. Not so the drug dealers, they're created by it. Oftentimes their equipment is far superior than the police department.

The Federal Government is making moneys available to fight the war on drugs, although, I believe, it will be a protracted war. If the complete criminal justice system works together as a unit, local police agencies can, with the aid of money and equipment, assist in halting the spread of this cancer called drugs. Thank you.

EQUIPMENT NEEDS

Senator HOLLINGS. Thank you very much. You say there is unauthorized listening on some of the radio channels where you work?

Chief LLOYD. Absolutely. My area is very small. It's a small area, about 4,000. A bedroom community with about 300 businesses. And it's right along the ocean. It has about 20,000 to 25,000 population during the summer months. But of the drug dealers in town, we know that over one-half of them have scanners and they're listening to us all the time. They know when we leave and it's just impossible to work in that environment and do anything successful about stopping the drugs. They can pinpoint where we're coming and going. Now, of course, if I had the funds available to buy inception radios where you can't hear, that would help me greatly.

Of course, I agree with the other gentlemen seated at the table, that I don't think that training is a big thing that we need real bad. I also hope you don't raise the match to 50 percent because there is no way that my small department could afford it.

Senator HOLLINGS. That's unanimous in all of the hearings. I think you have got an application on file with respect to that?

Chief LLOYD. Yes, sir.

Senator HOLLINGS. Best help it along. It's just I hear from every facet from the solicitor down to the small community that manpower and money is insufficient. There has got to be a realization by the body of politics that this drug crisis is way bigger than most people imagine. It's overwhelming. I mean, the description right there of Chief Lloyd with respect to making a bust in a building, that's a heck of a lot of police officers and a heck of a lot of equipment and everything else of that kind. It's just not like stopping someone on the highway, you're sending one man, one stop, no real trial or anything else of that kind. Now I guess they make every kind of motion and delays.

TRIALS

That's what I want to ask Solicitor Murdaugh about the bureaucracy of trial. You don't have that at least. You can get them and move them through your court? I'm thinking in terms of Noriega, it will be 2 years before we get in here to this Federal court. I recommended long ago, give him to the Panamanians and try him for the murders that he completed back in October of last year and let his own people try him because the truth of the matter is, if you and I convicted him this afternoon, it wouldn't have any credibility, they would say, that's a gringo from the north. So we're going to waste 2 years for the laws of motions. You have a 2-year motioning period in your system?

Solicitor **MURDAUGH**. No, sir; that is not the problem with our system. We can get a case ready to go to trial relatively quick, sir. There are very, very few delays with a case.

Senator **HOLLINGS**. All right.

Solicitor **MURDAUGH**. The problem that we have, an example of what I'm talking about, we're now holding court in Jasper County this week. We started on Monday. We had 686 cases on our trial roster. Being a lawyer you know, sir, that if we try cases, I can try maybe 7 or 8 cases in 1 week, and that's really pushing them through.

Senator **HOLLINGS**. I didn't know you had 686 people in Jasper County, much less cases.

Solicitor **MURDAUGH**. Yes, sir; and of the 686 cases that are on the roster, sir, 318 of them are drug cases. To do a little bit further than that, of the 318 cases, I would say that in excess of 50 percent, probably somewhere around 60 or 65 percent of those cases are the sale of crack cocaine. It carries with it a mandatory 15-year sentence, a maximum of 20 years. We very, very seldom get a plea from a person for crack cocaine. The sale of crack cocaine. So those are trials. I have 4 weeks of court a year in Jasper County, sir.

Senator **HOLLINGS**. That's a dramatic change from what it used to be, because you have been in there for 1 year.

Solicitor **MURDAUGH**. No question about it. I had, in my speech I had prepared, I had made mention of the bottleneck that is being created in the solicitor's office. And in thinking about it, sir, I don't think that's a Federal problem. You might give us some short-term help, but it is a State and county problem. It's not something that the Federal Government ought to be addressing. It sure would be nice if you would, but I really don't think that that is your problem. I think that our State has got to come to the realization that they have got to have more help.

FORFEITURES

Addressing something that Sheriff Woodberry said about forfeitures and confiscations, I now have a lawyer that I have obtained through a matching fund from Federal moneys to aid in the prosecution of drug cases and to handle forfeitures and confiscations. My solicitor's office consisted before his getting here, of one assistant full time and one part-time assistant. We were in court for 32 weeks a year. And I couldn't handle a forfeiture and a confiscation. I have a fellow now who is hired for that purpose and we're starting to get some of those through the court. But for 3 years, 2 years, we have done nothing in that area, to be honest with you.

Senator HOLLINGS. Just didn't have the manpower, couldn't do it?

Solicitor MURDAUGH. No, sir; we're holding criminal court 32 weeks out of the year.

Senator HOLLINGS. Yes.

Solicitor MURDAUGH. The forfeitures and confiscations are handled in civil proceedings normally when we're having court somewhere else, and I can't give up that one assistant to go handle the forfeitures when I need him there to handle the cases in the criminal court.

Senator HOLLINGS. And that's a money maker of course?

Solicitor MURDAUGH. Yes, sir.

Senator HOLLINGS. Well, is there any comments any of you wish to make further because this has been an outstanding presentation here this morning. I know you got other work to do. You make me feel like I'm holding down law enforcement by even listening here, everybody is so shorthanded, but the record will stay open for any questions the other Senators may have. The subcommittee is indebted to each of you here today. Thank you very much.

STATEMENT OF RAY O. ISQETT, CRIMINAL JUSTICE SERVICES VOLUNTEER CONSULTANT, AMERICAN ASSOCIATION OF RETIRED PERSONS

Senator HOLLINGS. Reopening of the record. The subcommittee will reconvene here for a few more minutes. We are privileged to have Ray Isqett, the investigator for Corporate Security, South Carolina Electric & Gas, who operates a volunteer program. I think we ought to have Mr. Isqett on the record describing what he is doing in this field and what suggestions he has. Would you please do it in a very succinct fashion, we're running a little bit behind but we're privileged to have you with us today.

Mr. ISQETT. Other than my function working for Scanner Corp., which is South Carolina Electric & Gas, as a corporate investigator, I'm actively involved with AARP, which is the American Association of Retired Persons in the criminal justice field, and have been for some time. We have advocated the use of volunteers not in a lot of law enforcement functions, but to assist law enforcement. We're operating now in all of the United States and we have representatives in a lot of the States doing exactly what I just said.

As the originator of Crime Watch in the State of South Carolina, we had a successful program in which we reduced property crimes in the State of South Carolina by use of volunteers. One of the most successful programs, of course, is in the city of Goosecreek, SC, in Berkeley County. We have a good successful program, Summerville, et cetera. And January 30 of this year, I had a news conference in which we introduced a new program called Drug Watch.

Senator HOLLINGS. You changed from Crime Watch now to Drug Watch?

Mr. ISQETT. Yes; what we're doing is using the same organization as Crime Watch and the citizens in the community. They're already organized, they already have their signs and are already in place. What we're doing is putting new emphasis on it. Putting emphasis on drugs as well as property crimes. We're addressing the facts of educating the citizens in the community who can do more about it than anybody else. I mean, it doesn't cost anything. Plus getting citizens to be involved with children at an early age to educate them never to become involved in the drug situation at a no-cost program which volunteers will be implemented and trained by AARP. We are applying for a grant, which we have been told the chance of success of getting this grant is very good. Next Monday, I'll be presenting that grant proposal in which the State Association of Crime Prevention Officers will put up the moneys for the match and then the Federal Government will give the 75 percent. This will enable people to have materials and decals and things like that. We're not asking for personnel, we're not asking for a lot of equipment, all we're asking for is printed material and decals in which we have already been told it will be approved. This reduces the cost. Instead of going for a $100,000 grant, that would leave some more money for somebody else to do something else. We're going for a smaller grant of $25,000, which will give us ample materials that we need to get this program across.

When I heard the testimony of several other people presented here today, in smaller counties like Jasper, Allendale, Colleton County, we have a lot of those counties in this State that do not have the law enforcement resources to do their normal job. But, I'm saying that with the training that AARP can present at no cost to a county, they will come and do the training, and they will train local citizens who have time and who will and are willing to volunteer their services. It will release those deputies and those law enforcement officers to do those things in which they're trained to do and they can do administrative-type functions and training functions, especially in our schools for our young people.

Senator HOLLINGS. Let me commend you, and particularly our American Association of Retired Persons, AARP. That's a wonderful initiative. I know Crime Stoppers works and if we can conform it also to Drug Stoppers, it will work even better. Let's follow that grant and see, because it's going to save money all the way around. The record will stay open, too, for any further statement you want to add. I appreciate it very, very much. Thank you.

[The information follows:]

PREFACE TO DRUG-WATCH PROGRAM

In conversations on every level and facet of society, the main subject discussed is illegal drug abuse.

The drug issue has been identified as the most pressing and important issue effecting more people directly or indirectly in America today. Drugs have infiltrated the entire soul and fiber of America, touching all levels and elements of society. The rich, poor, young, and old. All races have been impacted by this horrible disease. No one approach, idea, program or effort will provide the cure. It will take a combined effort by all parts of society—people who are willing to make personal contributions and sacrifices.

The answer to the drug problem starts with you and me. We must do everything legally and morally possible in an effort to stop the spread, decrease the demand and abuse, plus stop the supply entering our local area; but we need your help to be successful.

First, we must identify the problems preventing a successful conclusion. The first issue to confront is apathy. We are no isolationists, we are a community, and we are neighbors. What effects others does have an impact on all of us. The impact is more direct or serious to some, but indirectly we all pay an extreme price for unacceptable acts of conduct. This comes mostly in the form of public taxes, insurance premiums and loss of individual safety. We are either part of the solution or part of the problem. To not make a choice is to choose negatively.

The next step is education and awareness, not necessarily to identify drugs or their potency or effect, but how illegal drug use impacts upon us as individuals and as a collective society. This education and awareness program needs to be aimed at specific groups: (A) Naive persons—relative to illegal drugs and the consequences; (B) adults with children; and (C) persons who are impacted most—they have the most to lose, such as: (1) Reputation; (2) Jobs; (3) Family, (4) Property, or (5) Assets.

The next step is education! We must educate the public of the consequences and impact upon our society, especially our children. This effort should be targeted from three sources: (A) Home, (B) Church, (C) School. This will only work if the parents, religious leaders, lay persons and educators are informed, aware, and themselves educated to understand the seriousness of the problem. While we cannot dictate that these groups participate, we must seriously encourage and persuade them to be a part of the solution.

Furthermore, peer pressure certainly has a persuasive effort upon people, but usually it is to become involved in unaccepted behavior. Therefore to reverse the process, we need to apply peer pressure to have people conform or comply by ostracizing deviate behavior, such as drug abuse; then we will have a positive influence.

Action.—Once the accepted behavior and awareness process is accomplished, we are ready to take "action" as individuals and/or groups to bring about the desired results. The "action" part of the program which is best described in comparison to the "Crime Watch" program. Citizen, neighborhood participation and cooperation in the support of law enforcement in the effort to deter, detect, investigate and prosecute violators of drug offenses.

How to accomplish this goal:

This part of the program would require: (A) Recruitment, (B) Training, and (C) Motivation of interested persons. The removal of the fear of retribution as well as confidence of anonymity if they choose to be a witness for the prosecution. The success or failure of this section of the program will depend a lot upon the endorsement and commitment of the Chief Law Enforcement official in a given jurisdiction. This idea must be communicated and emphasized on a regular and continuous basis.

The next phase will require the following of our law enforcement agencies: (A) Active participation, (B) Patience, and (C) Coordination and communication with and to the public. An example: If information is provided to law enforcement by a citizen concerning a drug related problem, the law enforcement agency should have a system in which information can be communicated back to that citizen. The citizen should know the status of the investigation within a reasonable time frame. (Replies that could be used for confidential purposes are: "investigation is active", "continuing", "unfounded" or "arrest have been made".

QUALIFICATIONS FOR DRUG WATCH MEMBERSHIP

I. Agree to abide by all principles, rules, laws of the State of South Carolina, and the ordinances of Berkeley County.

II. Display prominently the symbol, sign, decal or indicator designed specifically for the program known as "Drug Watch".

III. Agree not to use, possess, sell, manufacture, distribute, barter or condone any activity involving illegal drugs of any kind or description.

IV. Discourage and/or boycott any business which sells or promotes the use of illegal drugs and/or paraphernalia.

V. To report any all knowledge of illegal drug use, sale, manufacturing, distribution or possession to the appropriate law enforcement agency.

VI. Agree not to allow any illegal drugs or persons using illegal drugs in your home or any business under your control.

VII. Agree not to support any legislation legalizing or reducing the penalty for illegal drugs.

VIII. Agree to support Local, County, State and Federal law enforcement agencies in combating illegal drugs.

IX. Agree to register to vote and exercise your constitutional right for the person who is the best candidate for the office regardless of party affiliation, race, sex, age, or affluence.

X. Agree to cooperate fully in every capacity possible and assist, if called upon, any sworn, certified law enforcement officer, when presented with a legal, properly executed search warrant for any and all property and/or persons, under my control, for the purpose for discovery of illegal drugs and/or paraphernalia.

INCENTIVES AND RECRUITMENT OF MEMBERS FOR "DRUG WATCH"

I. "Drug Watch" shall consist of persons and/or business, who express the desire to deter, reduce, and stop the use, sale, possession, manufacture, or the promotion of illegal drugs.

II. "Drug Watch" shall be a "not for profit" organization with persons appointed by the local, elected delegation within a political entity; to implement, and manage the activities on a bases deemed necessary by the members therein.

III. "Drug Watch" shall operate and promote education and awareness, abstinence, and to ostracize persons involved in illegal drugs.

IV. "Drug Watch" shall be in similarity to what is commonly known as "Crime Watch", "Neighborhood Watch", "Community Crime Watch"; and shall share the same goals of the prevention of crime but to attune more directly to the aspect of illegal drugs.

V. Incentives:

A. Any person or organization, who recruits any other person/s to join the "Drug Watch" program will be recognized by appropriate manner set forth as compensation and/or recognition.

B. Examples of levels of recognition:

1. Recognition shall always remain to the choice of the recipient to be publicly, private or anonymously.

2. Each individual recruited for membership shall equal 5 points.

3. Each business recruited for membership shall equal 25 points.

4. Each religious, fraternal, civic or other organized groups shall equal 25 points.

5. Any person or group who contributes money, for the operations and expense incurred by "Drug Watch" shall earn for each and every dollar 1 point.

6. Total accumulated points in one calendar year: 100 points equals a certificate of accomplishment; 500 points equals a certificate with Gold Seal for Superior Accomplishment; 1,000 points equals a suitable Plaque; 2,500 points equals Plaque and photo for news release as presented by the local governing body and chief law enforcement official of that entity; 5,000 points equals all of the above and a request of a letter to be sent by the Governor for recognition; 10,000 points equals all of the above and presentation to the State House of Representatives and Senate while in session and on record as a resolution; and 25,000 points equals request the Governor to award the "Order of the Palmetto"—the State of South Carolina's highest award.

(NOTE) To achieve any of the above mentioned awards, no more than one half of the points can be achieved by money donations. This is to prevent an award from merely being bought.

7. All persons who have achieved an award during a specific calendar year will be the special guest of "Drug Watch" awards banquet for recognition, if they desire to attend.

8. "Drug Watch" is in no way intended to be perceived as a replacement, substitute or the elimination of any other program or effort past, present or future, involved in combatting illegal drugs; but to enhance, coordinate and provide a cooperative uncompromising effort.

DRUG WATCH AGREEMENT

I. I will not use illegal drugs.
II. I will not associate with anyone who uses illegal drugs.
III. I will report anyone who does use illegal drugs.
IV. I will support my community in stopping illegal drug use.
V. I will not allow drugs on any property I control.

DRUG WATCH FOR SENIOR CITIZENS

Senior Citizens are not usually users of illegal drugs but are more prone to be victims of people who are involved in drug abuse. Drug addicts view senior citizens often as an easy "mark" for property crimes of robbery and, in some case even extortion, to obtain funds to support their addiction. The older citizen often is more apt to be reluctant to report or complain due to their perceived vulnerability to retribution. Also, a certain segment of senior citizens have adopted an attitude "I'll leave you alone if you leave me alone." Because the drug problem became a serious problem after their years of maturity, there has been what some identify as a generation gap. The older citizen has probably not had to cope with the raising of children with the current proportion of the use of illegal drugs.

Those who are most affected indirectly are persons who are on "fixed incomes." Higher taxes, increased insurance costs, increased health care costs have a more profound effect on them due to age and frequency of need for the services of health care and insurance. Combined with the fact that the senior citizen, on an average basis, has less exposure, due to the type and level of activity on a social and professional level of friends and acquaintances. It is a recognized fact that senior citizens can have a larger impact than other groups due to life experiences and their commitment level to programs and projects; especially on a Volunteer basis. Seniors are more active in many areas, more so than the average citizens; such as: voting, expressing themselves to elected officials, and influence, when motivated.

DRUG WATCH SUGGESTIONS FOR SENIOR CITIZENS

I. Become educated to the seriousness and extent of the drug problem.
II. Become aware of your effectiveness and ways to bring about change.
III. Become a volunteer in anti-drug programs.
IV. Support good, sound legislation that has a higher degree of success rate.
V. Report known or suspected drug activity to law enforcement.
VI. Make contact with civic groups and support organizations such as AARP, RSVP, VISTA, etc.

DRUG WATCH FOR YOUTH

The Youth of America are the most critical segment of our society that are most prone to become victims of the problem with drugs. Because of peer pressure, stress to achieve, need to be accepted and the approval of persons they associate with, lends to the vulnerability to become a user of illegal drugs. The need for a relief of the ever-increased pressures of the transition from a child to an adult opens the door for victimization. The immaturity of life experiences and consequences of their actions cause a serious threat. The attitude of the excitement and "live for now" and the thought of "I'm young and can handle it" mentality, weakens the desire to say "No". The nature of youth to rebel against authority, parents and the "norm", which stems from the new experiences they have in changes physically and psychologically are difficult to deal with. Drugs represent a way of suppressing guilt feelings and conscience to be involved in new-found "fun things", such as sex, and other deviate behavior activities that are temporary exciting and, more frequent than not, have grave consequences.

DRUG WATCH RECOMMENDATIONS FOR YOUTH

I. If not prescribed by a doctor or parent, don't take it!
II. Remember, success is a gradual life process—not immediate gratification.
III. Real friends will not ask you to do anything that is harmful or illegal.
IV. Think of how drug use will affect your future—as a professional, wage earner, parent—and your health.
V. Doing things that are illegal makes you a criminal.

DRUG WATCH RECOMMENDATIONS FOR PARENTS

I. Tough love is real love.
II. The activities of your child is your responsibility.
III. The contents and activity within your childs room is your concern and responsibility.
IV. Involve your children in decisions made relative to their social, educational and family activities.
V. Be consistent with support, discipline and leadership.
VI. Become aware of challenges, opportunities, problems and concerns of your children.
VII. Teach responsible behavior and the consequences of deviate behavior.
VIII. Participate in community activities that promote positive alternatives to delinquent behavior; ie: PTA, PTO, Civic, fraternal, and religious groups.
IX. If and when approached by law enforcement, school or community representative about the activities or conduct of your child (good or bad) listen with an open mind attitude.
X. Be the example for your child.

SUBCOMMITTEE RECESS

Mr. **Isqett**. Thank you very much.

Senator **Hollings**. Thank you. The subcommittee will stand in recess until this afternoon at 2 p.m.

[Whereupon, at 11:52 a.m., Wednesday, February 14, the subcommittee was recessed, to reconvene at 2 p.m., the same day.]

(AFTERNOON SESSION, 2:06 P.M., WEDNESDAY, FEBRUARY 14, 1990)

NONDEPARTMENTAL WITNESSES

STATEMENT OF DR. ROBERT E. BURKE, ED.D., SUPERINTENDENT, CHARLESTON COUNTY SCHOOL DISTRICT

ACCOMPANIED BY CANDY BATES

Senator HOLLINGS. Good afternoon.

The subcommittee will resume its final session. The record will be open for questions by the other Senators. We are sorry that Senator Rudman had to return to New Hampshire, but in any event there's already been shown a tremendous interest in the hearings. We have already picked up seven extra assistant U.S. attorneys, so if we keep on hearing it a little bit longer, we might pick up even more help from Washington.

The subcommittee is pleased this afternoon to have Dr. Robert Burke, superintendent of our Charleston County School District; Miss Ann Hawk of the Teen Institute; Ms. Linda Lothery, director of the program, the Right Track; and Ms. Jan Stewart, a DARE officer. That's the Drug Abuse Resistance Education Program that we have been hearing all about, and we finally got us a DARE officer to tell us first hand of the program's success.

Let me start here on my left. Dr. Burke, we'll be glad to hear from you, sir, at this time.

DRUG-FREE SCHOOLS

Dr. BURKE. The Charleston County School Board of Trustees and its administration are committed to drug-free schools. We expect school administrators and staffs to take an aggressive stance on the elimination of illegal drugs from school campuses.

Within the bounds outlined by the board, we work in a cooperative manner with law enforcement agencies in an attempt to rid school campuses of any illegal drug activity. The board and administration have initiated a four-part program to deal with this debilitating problem which afflicts American society today. This program begins with a strong statement in the form of policy articulated by the board against the use and abuse of illegal drugs on school campuses and during school activities. We try to take a comprehensive program, and it is a never-ending program because we have new clients every year that come in up through the grades. The program involves prevention, intervention, and treatment.

Second, the school system implemented a drug education curriculum for students from kindergarten through grade 12. This program is designed to provide students with factual information regarding the effects of legal and illegal drugs. It shows students ways of dealing with the peer pressure which too often encourages the use of illegal drugs. Also, it involves parents as an integral factor in the student support system. Other programs supporting this curriculum are the officer MAC Program, numerous "Just Say No" clubs and we have project DARE about which you will hear some more a little bit later.

A third approach included presentations by school district security officers to each high school and middle school faculty. During the presentation, staffs were educated as to current drugs, terminology, and paraphernalia utilized in our society. We felt our teachers needed to be on top of what to look for.

POLICE IN SCHOOLS

A final part to the program is the use of undercover police officers in a number of our high schools. This program began in September 1987. We know that there is a problem with drug use in America today. The mission of the undercover program was to assess the level of drug activity in several of our high schools located in different parts of the school district. The Charleston County metro major case unit worked with the superintendent and school security officers during the operations. The cooperation of Charleston County Police Chief Jack Sidoran was invaluable during two different major operations. The superintendent and the police agency involved agreed that there would be no entrapment of students and that there would be limited awareness of this operation during the time it was underway. Only the superintendent, school security officers, and police personnel knew of the operation. This was done for the safety of the officer and the protection of the principal's credibility with staff and students. Each undercover officer enrolled in school, attended classes, did homework, took tests, and essentially attended school much as would any high school student. Debriefing of the undercover officers indicated the following:

The Charleston County School Board expulsion policy serves as an effective deterrent to students bringing drugs on campus.

The vast majority of students are apprehensive of bringing or using drugs on campus. Not so off campus and on weekends.

Very little drug possession or use was observed on campus.

Administrators and staff members actively and routinely enforced school rules and were vigilant in the supervision of the school campuses.

Underage drinking in the Charleston community is a problem. Parties were attended where drinking was a common practice.

Evidence at the high schools indicates that those students who were involved with illegal drugs are involved off school grounds with very little to little involvement on school grounds.

DRUG-FREE SCHOOL ZONE

The school district utilizes South Carolina's one-half-mile law whenever possible. Information received from students, teachers, and citizens in general as to illegal drug activity within one-half mile of school is reported to the school district department of public safety and the appropriate police department. The superintendent has met with the chiefs of the area police agencies to indicate a willingness to cooperate with any investigations of illegal activities. Principals have been directed to report drug and alcohol violations. The school system has on occasion used dogs to check school facilities.

We must continue always to be vigilant and committed to keeping our campuses drug free. I am proud of our students. I know that the vast majority of students at each school are fine, law-abiding citizens. They should be applauded rather than judged by a very small minority of other students.

I appreciate also the assistance and cooperation which we received from the Charleston metro major case unit and the local police chiefs. Since our entire community must work together to combat drug abuse, it is encouraging and heartening to see cooperation across several police agencies.

PREPARED STATEMENT

Senator, with my statement which I provided to you, I also provided an outline of a number of activities that we are currently using in the Charleston County School District. I won't go through those now, but you have those and a description of each.

[The statement follows:]

STATEMENT OF ROBERT E. BURKE

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Secondly, the school system implemented a drug education curriculum for students from kindergarten through grade twelve. This program is designed to provide students with factual information regarding the effects of legal and illegal drugs. It shows students ways of dealing with the peer pressure which too often encourages the use of illegal drugs. Also, it involves parents as an integral factor in the student support system. Other programs supporting this curriculum are the Officer MAC program, numerous "Just Say No" clubs and project D.A.R.E.

A third approach included presentations by school district security officers to each high school and middle school faculty. During the presentation, staffs were educated as to current drugs, terminology and paraphernalia utilized in our society.

A final part to the program is the use of undercover police officers in a number of our high schools. This program began in September, 1987. We know there is a problem with drug use in America today. The mission of the undercover program was to assess the level of drug activity in several of our high schools located in different parts of the school district. The Charleston County Metro Major Case Unit worked with the Superintendent and school security officers during these operations. The cooperation of Charleston County Police Chief Jack Sidoran was invaluable during two different major operations. The Superintendent and the police agency involved agreed that there would be no entrapment of students and there would be limited awareness of this operation during the time it was underway. Only the Superintendent, school security officers and police personnel knew of the operation. This was done for the safety of the officer and the protection of the principal's credibility with staff and students. Each undercover officer enrolled in school, attended classes, did homework, took tests, and essentially attended school much as would any high school student. Debriefing of the undercover officers indicated the following:

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I appreciate the assistance and cooperation which we received from the Charleston Metro Major Case Unit and the local police chiefs. Since our entire community must work together to combat drug abuse, it is encouraging to see cooperation across several public agencies.

Drug-Free Schools and Communities Act of 1986

Grant Award to Charleston County School District

Identified Program Areas for 1989-90:

STRATEGIES is a CCSD required comprehensive K-12 alcohol and drug activity-based curriculum. This curriculum is implemented in the following courses:
K-8 Health and Science , 9-12 Health, Family Life, Driver's Education, Biology, and General Science.
Sixty-eight public and seven private schools have received training and have completed at least five activites in the various areas.

Teen Institute is a week-long peer training workshop which will be held during the summer of 1990 at Francis Marion College and Presbyterian College. All high schools will have the opportunity to select a five-member team for participation. The following high schools participated: Lincoln High, St. Andrews High, Ashley Hall, First Baptist, St. John's High, Burke High, and Porter Gaud.

"Here's Looking at You, 2000" is a supplementary alcohol and drug prevention curriculum which will offer training for 15 additional counselors in elementary, middle, and high schools. Training is scheduled for the summer of 1990.

"New Model Me" is a high school alcohol and drug abuse prevention course which can be offered as a one-half unit for Social Studies credit used as an addendum to the existing curriculum for "At Risk" youth. Training was conducted on January 10-11,1990 by John Rowe, the author of "New Model Me". Seven CCSD high schools and three agencies participated in the two-day training.

D.A.R.E. (Drug Abuse Resistance Education) is a law enforcement/ community project to be continued at Mt. Pleasant Academy and piloted in other CCSD schools. Charleston County School District was the first to implement D.A.R.E. in the State of South Carolina as well as have the first certified D.A.R.E. trainer. In 1988-89 Mt. Pleasant sent one officer and the Charleston County Police Department sent four officers to become certified D.A.R.E. trainers for Mt. Zion Elem., Minnie Hughes Elem., E.B. Ellington Elem., and St. James-Santee Elementary. As of January 1990 we have three full-time D.A.R.E. officers with the Mt. Pleasant Police Department, four part-time Charleston County Police D.A.R.E. officers, one part-time North Charleston Police D.A.R.E. officer and two State Probation and Parole D.A.R.E. officers. The following public and private elementary schools are participating in the D.A.R.E. program: Minnie Hughes, E.B. Ellington, Evangel Christian, Springfield, Ladson, James B. Edwards, Remount Road, Burns, Mary Ford, C. C. Blaney, Country Day, Mt. Zion, Jane Edwards, St. James-Santee, Whitesides, Mt. Pleasant Academy, Jennie Moore, Christ our King-Stella Maris, Trident Academy, and James Simons. Donations from The Hundred Club of Greater Charleston will provide up to $1,500 annually for Drug Abuse Resistance Education in the tri-county area.

Demonstration Projects are mini-grants which are awarded to individual schools, community agencies and other CCSD departments for alcohol and drug abuse educational projects. As of January 1990 $21,700 was awarded for the Fall Semester.

Student-Initiated Activities are funded through mini-grants, which are awarded to individual schools for activities developed by students (under administrative supervision) to aid in substance abuse prevention/education activities. As of January 1990 $1,925.00 was awarded for the Fall Semester.

Project Prom/Graduation is a project targeted for all high schools in Charleston County. These schools will have the opportunity to participate. The project consists of sponsoring drug and alcohol free - parties for seniors and has received enthusiastic support from local businesses in areas where it has already been implemented. Training and inservice was January 14, 1989. ($150.00 was given to each high school to implement the projects). The training date for 1990 will be announced.

Elks Lodge 242 Drug Abuse Prevention Essay Contest is an essay contest for grades 4 through 9. The Charleston Elks Lodge 242 provides U.S. Savings Bonds for the 1st place ($100.00), 2nd place ($75.00), and certificates for 3rd place winners.

The Elks Lodge will provide buttons for 4,000 students at the "Just Say No" Rally.

"Just Say No to Drugs" Rally stresses good clean fun through games, programs and physical activities. Over 3,200 students attended the 2nd annual rally at Palmetto Park on December 5, 1989. The third annual rally is scheduled for March 10, 1990 at the park and the raindate is March 24, 1990. Over 4,000 students grades 3 through 8 will participate in the tri-county area.

USA Today delivered newspapers and drug abuse guides to all CCSD 7th grade students. The students received two newspapers to include Classline Focus and a drug abuse guide. The U.S.A.T. robot was on hand and visited two elementary and two middle schools before the "Just Say No to Drugs " Rally in December. USA Today will provide us with Classline Focus the week of March 5, 1990.

National Red Ribbon Week was held October 22-30,1988. Posters advertising the event was distributed to all CCSD schools. The alcohol and drug education contact persons and principals were encouraged to emphasize the benefits of a drug-free society through school-based activities. A county effort was made in celebrating the Red Ribbon concept. Red Ribbon Week was celebrated on October 22-29, 1989.

Graduate Courses offered to CCSD Certified Personnel for 1989-90
CCSD offers to certified personnel free of charge the following courses:

Graduate Course: Ed. 587 Wellness and Drug Abuse Prevention
Graduate Course: Ed. 690-E Techniques and Methods of Enhancing Self-Esteem for At-Risk Youth, K-12.
Graduate Course: Ed. 690-E Counseling Techniques for Children from Dysfunctional Families.
Graduate Course: Ed. 692U Prevention and Intervention in Alcohol and
Charleston County Student Leadership Connection is a weekend retreat for middle school students { (2)-6th, (4)-7th, (2)-8th grade students and one advisor} emphasizing drug and alcohol education and many physical activities for the students' enjoyment. The first retreat was held March 31 through April 1, 1989 at the Girl Scout Camp with over 60 students participating. The fall retreat was rescheduled to February 3, 1990. Over 150 students and forty adults participated. Each middle school developed an action plan for prevention activities to implement for the year.
The Spring Camp-out Retreat will be May 11-12, 1990 at the Boy Scout Plantation on Wadmalaw Island.

Be a Good Sport... Life is an All-Star Game: Charleston Rainbows and CCSD Guidance Department co-sponsored the "Adopt a Star" program for sixth grade students. Each middle school was assigned a "Star" to work with the individual schools prevention programs. "BE A GOOD SPORT...LIFE IS AN ALL STAR GAME...JUST SAY NO TO DRUGS" finale was held at Rainbow ball park on May 28, 1989 with over 1,000 participants. The 1990 ball game is scheduled for June 3, 1990.

DRUGS-A DEADLY GAME. A nationwide prevention program sponsored by the Coastal Carolina Council of the Boy Scouts and Charleston County School District will be distributed to sixth grade classrooms, March 1990.

QUEST: A prevention curriculum sponsored by the Lion's Club of America for middle school students. This program is being piloted at Alice Birney, Morningside and Norman C. Toole Middle Schools.

All projects and activites are funded through the "Drug-Free Schools and Communities Act of 1986" grant, coordinated by Candice L. Bates, Consultant, Guidance Services, Charleston County School District.
2/5/90

ON CAMPUS DRUG/ALCOHOL USE

Senator HOLLINGS. Very good. The undercover activity which you say is not to make any arrests but only to make an assessment?

Dr. BURKE. Make an assessment, and I think one arrest resulted from it, and that was an off campus activity at an apartment complex where adults were selling to minors.

Senator HOLLINGS. But on the campus itself, you say very little use on campus of drugs.

Dr. BURKE. That's correct. These were three different undercover officers, college educated, fairly perceptive individuals who had an opportunity to work in and around young people.

Senator HOLLINGS. But most of it is off campus and most of it is alcohol. Is that what you would say?

Dr. BURKE. Yes; I would say most of it is alcohol, most of it is off campus. It doesn't mean that we have no reason to be concerned. I think we have to be vigilant at all times, but I think the area for which we'll take responsibility, and that is on campus, that area is pretty well under control, due to a strong statement by the board, the education, and the vigilance on the part of individuals. As I look across the county, I am, of course, concerned with illegal drugs, but I am also concerned with the access to alcohol that young people have and the parties, and what have you, that go on. One of the parties that was attended by an undercover officer was in an open field. There were about 250 young people at the party. There were lookouts. There were several kegs of beer. There were hard drugs as well as alcohol. And this party was advertised, as they often are, not just in Charleston but advertised in the United States at high schools, ahead of time with hand bills and folks knew that there was going to be a party, and they pay $5 a head to attend the party. He indicated also that different schools have different locations for parties, whether it be public schools or private schools. There are different locations and the parties occur, and young people attend the parties. My concern is not only with what happens at the party but the aftermath. I have been in two different school systems where real tragedies occurred as a result of these activities where young people were killed. One youngster beaten to death, another youngster stabbed to death, another youngster killed or a group of youngsters killed on the way home from a party because the car ran off the road due to the drunkenness of the driver.

Senator HOLLINGS. If we are to believe that you are cooperating and working with the law enforcement and the advertising and handbills, the party itself, we don't need undercover work. How is it they don't break up the party, law enforcement?

Dr. BURKE. Well, they don't give these handbills to the police officers.

These handbills get passed around at the school, and they don't get passed to adults, so there are times when—most times the adults at school don't know when and where the party is. They aren't put up on telephone poles. They are passed around in school, or the word goes around, and youngsters know where the parties are. I think—I know on more than one occasion, the police agencies have gotten wind of the parties. I do know that the Charleston County Police Department mounted an operation in the north end of Charleston County to break up a party there. Their presence caused the party to disintegrate. So when they do find out, they take action. The challenge is finding out.

DRUG EDUCATION CURRICULUM

Senator HOLLINGS. Everyone we have heard from has been asking for more money for education. How thorough is the education in the Charleston schools? When I talk about thorough, I know you have different programs, but is that the case, they had a little program here and 1 week or so later another program. How constant and how thorough is the education against drugs and from what grades to what grades?

Dr. BURKE. As I size up our program as we have it right now I am pleased. Three years ago we had a program that was spotty at best. We had a little bit here, a little bit there. Since then we have implemented a curriculum which goes from kindergarten through grade 12. The kindergarten program would be looking at good drugs and bad drugs, what the skull and cross bones mean, those sorts of things, and running up through middle school, the early part was just information. Then running through middle school, not only information but how to deal with peer pressure. And then, getting into high school, the pharmacological aspects of drug use and abuse, dealing with peer pressure there. There's a curriculum now that weaves its way through all of our grades.

But in addition to that, we have trained our counselors. There are a number of activities on campus such as the "Just Say No" clubs and rallies, training of student leaders, weekend retreats for student leaders to be trained and get back to school and initiate programs where students talk with other students.

It's a program that involves education but also a good deal of reinforcement so that the kids hear information on problems with doing drugs on a pretty steady basis.

I think this coupled with what I see on television, the spots there, and I think we all think of the fried egg, frying your brain, that spot, those things have been effective from my vantage point in this country. I think every school system ought to have a strong curriculum. I think every school ought to have the backup activity involving students. We just can't have the teacher preaching. We also have to have students becoming involved and dealing with and talking with other students.

Senator HOLLINGS. What about off campus at the athletic events or the football games? Can you control that?

Dr. BURKE. Yes; it's not quite as easy to control as the classroom. The classroom, of course, you have got 30 students with you. At a football game, it's a little different, but we have good police support at those, plus I think the community understands that we have taken a strong stand. And when I say, "we," everyone from the school board right into the schools and principals report to me that they hear from parents about this group over here, that group over there at a football game. Of course, we do have our staffs out and about during football games. They have to do that not only for illegal drug activity but just general order at a football game. It's more difficult at the athletic events or at any event compared to the classroom.

FEDERAL FUNDING OF DRUG EDUCATION

Senator HOLLINGS. I was wondering if your funding has increased? It didn't seem like we got much in South Carolina in 1986 for drug-free schools. We only appropriated nationwide $2.5 million. But with the Drug Act, and so forth, the war on drugs, 1989, it jumped to $354.5 million. And for this present fiscal year $538 million.

So you see we have increased it. Now, South Carolina only received in 1989 $4.1 million, and this present year $6.7 million. I wonder how much has got all the way down to, let's say, the schools here in Charleston County?

Dr. BURKE. If we are talking about the Drug Free Schools and Community Act of 1986——

Senator HOLLINGS. Right.

Dr. BURKE [continuing]. We are looking somewhere in the neighborhood of not quite $250,000 for Charleston County last year; $229,000.

We have been able to use that and put together a number of pilot programs, as well as fund a person to coordinate and more or less cheerlead and come up with ideas, and so forth. That person is Candy Bates, who is here in the audience. She has done an excellent job.

PROGRAM ASSESSMENT

We know a number of programs that are working well.

Senator HOLLINGS. Like what? Which ones are working well and which ones are not working so well?

Dr. BURKE. We feel that Project DARE is a top-notch program. That's a program that is more costly than others, because of the people involved. The police officer working full time with that along with materials. And they work—we have started off with fifth grade students, and that was first in Mount Pleasant under Chief Wiley there, and we would like to see that program expanded. We have it in a number of schools now, but that's costly not only for the district in terms of materials but also the police departments in terms of personnel. That's a top-notch program.

Some of the rallies and the training that we have for young people, we feel that those things are important.

The grants that we allot to teachers and to students can be very creative. Some of those are pilots, and as we see those that would work in one school, we look to replicate those in other schools.

Senator HOLLINGS. Which ones are not working so well?

Dr. BURKE. I don't see any here that I would say aren't working as well.

I would be surprised if Candy Bates would give me anything that wasn't working well.

Ms. BATES. They are all working. Excuse me.

Dr. BURKE. Some are more effective than others. I would say an essay contest or an art contest would not strike students with the same intensity that a police officer coming in and working on a weekly basis with students would. But I don't think that we need to take one approach. There really does need to be an approach that utilizes a number of aspects so that the broad range of students is reached.

Senator HOLLINGS. Very good.

STATEMENT OF JAN STEWART, POLICE OFFICER, MOUNT PLEASANT PROJECT DARE

PREPARED STATEMENT

Senator HOLLINGS. Let me go over here now to Ms. Stewart, Officer Stewart. Will you tell us about the Drug Abuse and Resistance Education Program.

Ms. STEWART. Yes, sir.

[The statement follows:]

STATEMENT OF JAN STEWART

Senator Hollings, members of the Committee, Staff: As a police officer I wish that I could report today that all is well in our communities, but we all know that the presence and problems of drug and alcohol abuse in South Carolina are undeniable. Information, as it emerges, about the nature and extent of drug and alcohol abuse and related crime continues to alarm law enforcement, our elected officials, educators and parents. But nowhere is the alarm more loud than the one sounded by the drug problem among our school-aged youth. Surveys of South Carolina public school students conducted by the National Institute on Drug Abuse, as well as those conducted by the South Carolina Commission on Alcohol and Drug Abuse, reveal use of marijuana and cocaine among seventh graders through seniors. The same was found for current use of alcohol. Moreover, alcohol and drugs are the number one killer of South Carolina's youth most often seen in alcohol/drug-related traffic accidents.

While it is clear that the supply of drugs which is at the root of much of our problem must be curtailed, the demand for drugs must also be addressed. If we are to expect our children to say "No" to drugs tomorrow, then we best today equip them with the skills needed to resist the pressures they will face to experiment with drugs and alcohol. It is no longer an answer to say "Let the school system handle it." Nor is it an answer to say that our present response system is insuring future emotionally mature men and women. It is not. In my view, we must place more emphasis on education. Not just another program, but rather drug abuse resistance education that begins at the earliest point possible of a child's formative years. Children are our most precious resource and we must teach them early on that alcohol and drugs is not their passport to adulthood.

I happen to feel that project D.A.R.E. is among the best of our educational approaches and would be pleased to answer any questions you may have about the D.A.R.E. Program.

DARE IN CHARLESTON AREA

Senator HOLLINGS. How about everyone having a DARE Program? How extensive is DARE in the Charleston area?

Ms. STEWART. In the Charleston area, we have eight officers now teaching DARE. Some of them are part time basis and some of them are full-time basis. One officer can teach 12 to 15 core lessons a week. So you can't think how many officers does it take to cover how many schools. You have to count grade levels. How many fifth grades do we have? Because one officer can cover up to 15 fifth grades a week and hopefully get in some visitation levels for K through 4.

Senator HOLLINGS. How many officers do we have now and how many do we need?

Ms. STEWART. I would have to know how many fifth grade classes there are in all of Charleston County to answer that question. We currently have eight.

Senator HOLLINGS. I see.

Dr. Burke, how many would that cover?

Dr. BURKE. We have 43 elementary schools, and we have on the average two to three fifth grade classes in each school, so we may need upward of 100.

Senator HOLLINGS. We need 100, and we've got 8. I'm just trying to get a feel for how far we have to go.

Ms. STEWART. Actually 11 now, because we just graduated 2 more.

Senator HOLLINGS. Two more. You had a grant application right after Hugo you were working on. They asked me to get the papers in. Did that work?

Ms. STEWART. Yes, sir.

Senator HOLLINGS. We were trying to help.

Ms. STEWART. Yes, sir; that's how we added the two other officers to help.

Senator HOLLINGS. That's how we added the other two.

Ms. STEWART. Yes, sir.

Senator HOLLINGS. Very good. The program has got to be effective, because we have heard in Columbia and Greenville that the one program that seems to have the best acceptance and the better result is the DARE Program.

STATEMENT OF LINDA LOTHERY, DIRECTOR, THE RIGHT TRACK

Senator HOLLINGS. Let me hear now from Ms. Lothery, let me hear about the Right Track.

Ms. LOTHERY. Well, actually I am not going to be speaking specifically about what this program does. I have been in the field for over 10 years, and have some recommendations that I would like to make.

Senator HOLLINGS. Very good.

How many children would there have been in the program here in the year 1989 in South Carolina?

Ms. LOTHERY. Probably six to eight families have gone to Florida that I know of. Two have gone to Atlanta. Many have just chosen to pretend that the substance abuse problem will go away, and they re-enter our system, either through legal violations and department of youth services. Unfortunately, some have long since dropped out of school. Some have gotten involved in all kinds of delinquent behavior, so my hunch is that if we had a long-term residential program in this area, or at least in this State, there would be sufficient numbers of families who would participate in that program willingly. The program in Florida and Atlanta requires that family members go to Florida every other weekend to participate in their child's treatment. Again this is a barrier which prevents a lot of families from taking their child to the appropriate treatment facility.

Senator HOLLINGS. I don't know how that's going to be funded adequately. Is there a similar Right Track program up in the Piedmont section?

Ms. LOTHERY. Yes, sir; it's called the School Intervention Program, and I believe there is a School Intervention Program located in almost every county across the State of South Carolina. Unfortunately, the Right Track or School Intervention Program can only do so much. We generally see the clients once a week, maybe twice a week. But for a child who's addicted to substances or is a heavily involved user, coming into a program once or twice a week is not enough. They need to be removed from their friends, from the availability of the substance. Even 30 days of inpatient treatment for many of them is ineffective.

STATEMENT OF ANNE HAWK, TEEN INSTITUTE YOUTH ADVISORY BOARD

Senator HOLLINGS. Miss Hawk, we welcome you. Mrs. Nancy Hawk is your grandmother?

Miss HAWK. Yes, sir.

Senator HOLLINGS. I found out that's the only thing that Nancy and I can do that Strom can't is have grandchildren. So we really welcome you.

Miss HAWK. I believe that Teen Institute is the most influential program for fighting substance abuse in the State. It teaches high school students who have been identified as drug-free leaders how to get peer led prevention programs started in their area.

Last year there were four Teen Institute summer sessions. A team consisting of four students and an advisor attended from almost every school in the State.

Teen Institute is a year long event. It consists not only of a week-long summer training session, but also teen prevention projects to be implemented during the school year.

During the week at Teen Institute, students take a variety of courses which teach them communication and leadership skills, how to use the media effectively, methods for developing community awareness, and it gives them many project ideas. The students use the things that they had learned during the week in composing their team's action plan. This plan identifies the drug-related problems in their communities and it gives them goals and objectives for how to solve them.

My school's Teen Institute team began the club Wando's Involved Teens at our school. We learned how to present drug and alcohol prevention skits to middle and elementary schoolers. We sponsored alcohol-free prom cruises and various alcohol and drug-free dances. We sponsored events like drug awareness week.

We feel that getting involved with younger kids is important, because they look up to high school students.

At Teen Institute the power of positive peer pressure is emphasized. Teens learn that they can use their influence to convince other teens not to use drugs and alcohol. Teen Institute is a future-oriented program. It teaches teens how to make positive changes in their schools and communities. Therefore, Teen Institute benefits not only the teens that go to it, but it also benefits everyone in their community.

Last summer I was given the opportunity to help start a Teen Institute program in Cali, Colombia, South America. The trip was made possible with a grant from Hearts of the Americas. The Teen Institute begun in Cali was so successful that they have already made plans to spread to other areas of the country and get more schools and students involved. I would like the student exchange between the two countries to continue. I think it would be very beneficial to both countries if it did.

I have been involved with Teen Institute for 3 years. I am an officer on the youth advisory board which serves as the youth staff of Teen Institute.

The Teen Institute experience has been the best of my life. I have become a better, more self-confident, more compassionate person through becoming involved in the program. It has helped me develop the skills, attitude, and leadership qualities I need to become a successful soldier in the war against drugs.

PREPARED STATEMENT

Senator HOLLINGS. Thank you. We will insert your prepared statement in the record at this point.

[The statement follows:]

STATEMENT OF ANNE HAWK

REPORT

Teen Institute is probably the most influential program for fighting substance abuse in the State. Its purpose is to teach students who are opposed to alcohol and drug abuse how to get peer led prevention programs started in their schools. It is a training program for leaders. Teen Institute is a year long event which includes the week long TI summer training session, team prevention projects for the school year, the TI Reunion, and Youth Advisory Board meetings and activities. The Youth Advisory Board serves as the youth staff at the Teen Institute or TI summer sessions.

The summer sessions are held at Presbyterian College in Clinton, SC, and at Francis Marion College in Florence, SC. The students attending TI stay at the college dormitories during the week. In 1989, there were four TI summer sessions. A team from almost every high school, public and private, in the State attended. A team consists of four students and an adult advisor. The adult staff at TI consists of substance abuse professionals from across the State and Nation. At each TI summer session, two Youth Advisory Board or YAB members are elected. At the end of the summer approximately 20 more promising youths are selected by the South Carolina Commission on Alcohol and Drug Abuse (SCCADA) on the basis of leadership abilities shown at TI and their written applications. I am a member of the YAB.

At Teen Institute, the power of positive peer pressure is emphasized. Teens learn that they can make a difference in their communities by influencing other kids not to use drugs and alcohol. Participants at TI learn how outside factors like peer pressure and the media influence personal decisionmaking and problem solving. TI addresses the power teens have to change the effects of these outside factors to their advantage. Teen Institute is future oriented. It teaches teens how to make positive changes in their schools and communities. Therefore, Teen Institute helps not only those people who attended but all the people around them.

Teens attending Teen Institute spend the week taking a variety of courses which teach the participants communication and leadership skills, how to use the media effectively, methods for developing community awareness, how to deal with peer pressure, and how to go about starting clubs in their schools. They get project ideas for having successful alcohol and drug free dances and parties, delivering Drug and Alcohol Awareness Weeks, designing Prom Night and Graduation Projects and projects for welcoming students back to school. One of the most important aspects of TI is team time. During team time, students meet with the other participants from their school and develop an action plan implementing what they have learned at TI. The students assess the needs of their community, write out goals to deal with these problems, and write objectives for accomplishing the goals. When the teens get back to their schools, they follow their action plans and try to accomplish all their goals.

My favorite part of TI is family group. When teens arrive at Teen Institute, they usually only know the people from their schools, but they leave feeling close to everyone. Family groups is important in establishing these close relations among the students. Each participant is assigned to a family group which consists of about 10 other students, a YAB member, and an advisor. These people become the participant's family away from home. They meet together about two times a day and share their thoughts, feelings, and ideas. Besides talking, they play games to build trust among group members. Family groups encourage feelings of independence and self-worth in each group member.

One of the major goals of Teen Institute is to teach teens that they can have fun without drugs and alcohol. This goal is definitely accomplished. Every teen I know who has attended Teen Institute, says it is the most fun week that they have ever had. The entertainment includes water balloon fights, cheers, skits, dances, games, community time, honor awards, staff versus student volley ball games, singing, and social hour.

TI has been the most meaningful experience of my life. It has given me confidence in myself and compassion and understanding for others. It has given me the skills and the positive attitude I need to start prevention projects in my school and around my community and it has helped me to become a good leader. I know the friends I've made at Teen Institute will last a lifetime, because we all share a common goal—to make the world a better place.

REPORT ON MY TRIP TO COLOMBIA, SOUTH AMERICA

In South Carolina, there is a program called Teen Institute. It is a program in which teens from across the state spend a week of their summer on a college campus learning about substance abuse and how to prevent it. Teen Institute is sponsored by the South Carolina Commission on Alcohol and Drug Abuse. A group called Caminos which is located in Cali, Colombia and headed by Alicia de Patino decided that they wanted to start this successful program in their country. This summer, they sent two teams of Colombian students and their advisors to Teen Institute sessions in South Carolina to learn about the program. In exchange, they invited a team of South Carolinians to their first Teen Institute to help them with any problems they might encounter. I was one of the four teenagers selected for this incredible experience.

We arrived in Cali, Colombia on Wednesday, August 30. We were warmly greeted at the airport by the students and advisors who came to the Teen Institute sessions in South Carolina. We spent Wednesday and Thursday nights in the homes of the students. During these days, we were given a grand tour of the city of Cali. It is a beautiful city that is surrounded by tremendous mountains and filled with exotic flowers. One of the most interesting things we saw were the homes of the "narcos" and mafia members which had been taken over by the police when their owners fled the country. The houses were very elegant and obviously expensive.

The Colombian Teen Institute or Instituto Juvenile as it is called in Spanish was held in a conference center outside of the town of Buga. We made the one hour journey from Cali to Buga early Friday afternoon. We spent the rest of the day making signs, learning games from the recreation director, Carmen Alicia Arias, and creating cheers with which to welcome the students. Those students from South Carolina and the students who had come to the Teen Institute in South Carolina were appointed as the youth staff.

On Saturday, all the students arrived. About one hundred students and adults attended in all. Since very few of the students spoke English fluently, I was given the opportunity to practice my Spanish. I have taken three years of high school Spanish so I was able to communicate fairly well. The students were very patient with me. They spoke very slowly so that I could understand.

A large portion of the week was spent sharing accounts of the drug related problems at our schools. I shared ideas for projects which had been successful in my school for dealing with the problems of drug abuse. Because there is no drinking age in Colombia, many students have problems with alcohol. In many teenage dance clubs, you must buy a certain amount of alcohol in order to stay. One student told me that there is a pool hall in his school where students go and drink during lunch. Drugs are easily attainable in Colombia. Every student that I talked to knew someplace or someone that sold drugs.

Social discrimination is a big problem in Colombia. It is a country that has virtually no middle class. People are either very rich or very poor. The difference between people who attend public and private school is incredible. They look different, act different, and dress different. One of the reasons the Colombian Teen Institute was so special was because kids from private and public school were mixed together. They learned that they shared a common goal for the prevention of drug and alcohol abuse. They also learned that despite seemingly unreconcilable differences in their upbringing and social standing that they could still be friends.

Every day, two speakers came to talk to the Teen Institute. The topics of their speeches ranged from AIDS, to drugs, to guilt, to building self esteem. The purpose of these speeches was to educate the students and to motivate them to start programs in their schools.

Because of the escalating problems in Colombia we were forced to leave the country on Thursday, September 6 instead of on Sunday as we had originally planned. Leaving Teen Institute early was very sad. The friendships we made during those few days will last a lifetime. As a goodbye present, a picnic and a farewell ceremony were held in our honor.

The Teen Institute in South America was different in some ways from Teen Institutes in South Carolina. One thing that I really appreciated was its size. Because it was so small, you really got to know everyone. I also thought the games that we were playing were very effective in relaxing everyone. I plan to share some of these games with the youth staff for Teen Institutes in South Carolina so that we can implement them into our curriculum. On Sunday, mass was made available for all students. I think that this is very important and would like to start doing this at our Teen Institutes. Because it was the Colombians first time doing this program they encountered some problems due to disorganization and lack of communication between the adult and the youth staff. However, they did an excellent job working out their problems and making their Teen Institute a tremendous success depite them.

My trip to South America was the best experience of my life. The trip was both rewarding and motivational. It has inspired me to want to maintain the ties between the two countries, and possibly to make a career out of the prevention of substance abuse. I felt the trip was very important and successful for many reasons.

Primarily, it helped us to foster closer relationships with our peers in South America. The relationships that we formed are symbolic of the cooperation that could exist between our countries. It also helped us to realize how alike we are, how similar our goals are, and how ultimately dependent we are on each other. Teens in the United States as the demand side and Colombia, as the supply side both need to be working for a drug-free world.

Throughout the week at Teen Institute, we shared the problems we had at our schools and the methods that we were using to deal with them. We came to a mutual appreciation of each others culture and understanding of each others problems. It seems as if people in the United States always feel superior to those in other countries, but we need to realize how much we can learn from them.

The Colombians are planning to continue to hold Teen Institutes in their country. They would also like to expand the program to reach more students. With the continued support of Partners of the Americas, the student exchange between South Carolina and Colombia can continue.

STATE PARTICIPATION IN TEEN INSTITUTE

Senator HOLLINGS. That's very impressive. You say practically every school gets together in South Carolina and participates in Teen Institute.

Miss HAWK. Mh-hmm. Some schools aren't given the opportunity to go because there is not enough room in the program. That's why I would like to make it bigger.

Senator HOLLINGS. What controls the size of the program when you say not enough room in the program?

Miss HAWK. Well, this year we were only given the opportunity to have four sessions, and we would like to have more sessions, so that's why we need more funding to do it. Because the individual schools have to pay to have their students go, and many schools can't afford this.

Senator HOLLINGS. Where is the funding, what's the source of it now? Is that a Federal grant?

That's alcohol and drug abuse?

Miss HAWK. Yes, mh-hmm.

Senator HOLLINGS. That seems to me to be realistic in something getting done and going and growing.

You say it is growing.

Miss HAWK. Yes, sir.

Senator HOLLINGS. The only thing really restricting it now are funds?

Miss HAWK. Mh-hmm.

Senator HOLLINGS. The students themselves participate and are involved in it.

Miss HAWK. It has grown every year since it started.

TEEN INSTITUTE IN COLOMBIA, SOUTH AMERICA

Senator HOLLINGS. You had a good experience. Tell us about that experience down in Colombia. You speak Spanish?

Miss HAWK. I have taken 3 years of Spanish in school, and when I was there, I learned a lot more, but a lot of the students at the Teen Institute program already knew English. And eight students from Colombia came to Teen Institutes in South Carolina so they could learn more about it. So we had plenty of interpreters.

TEEN INSTITUTE IN CHARLESTON

Senator HOLLINGS. That's very good.

What's your observation, Dr. Burke, of Teen Institute? Have you experienced that in the Charleston schools?

Dr. BURKE. Yes; that's part of our supplemental program. That's actually the second item that we have in the backup information. We found it useful. High schools have an opportunity to select a five-member team for participation. We have a number of high schools involved with it.

This, I think, underscores the importance of a multifaceted approach, not just the plain old education, but also opportunity for young people to learn and talk with other young people and assist them with peer pressure. One of my recommendations would be for a student assistance program to be implemented certainly in

Charleston County for students that do have problems so they can receive assistance from other students, and there will be good coordination of that. It might be something that would be run through the substance abuse commission. We need to take a multiprong approach.

Senator HOLLINGS. This is where we are going to finally solve it, I think, is at the Teen Institute stage and age. It can't start too early, but I mean that's really meaningful at that age. That's probably where the decision is going to be made to say no.

Dr. BURKE. They need to hear it when they are very young, and then that needs to be reinforced as they come up, and there will be times when they will look to succumb to the temptation, and there needs to be someone there to say, wait a minute, you need to think right.

Senator HOLLINGS. Well, as Miss Hawk is commenting, it broadens you otherwise.

I remember in my days they had the International Forum Club or the High Y and other things. Now, I guess in this modern day with the drug threat as prevalent as it is, it's good to have a Teen Institute on every campus, and we ought to try our best to get one started.

You don't have any idea how much money goes for the Teen Institute Program in Charleston, do you? Have you got a figure?

Ms. BATES. It's $814 for one team, and we pay that for the teams to go.

Senator HOLLINGS. That's $814 apiece?

Ms. BATES. That's $800 for 1 week.

Miss HAWK. Eight hundred dollars.

Dr. BURKE. Senator, this is Candy Bates, who is our lead person for what we are attempting to do in Charleston County for drug prevention.

Ms. BATES. We offer many grants to every high school, and the private schools are included. They have the opportunity to participate. We are very fortunate because we have the money to participate and other counties do not.

Senator HOLLINGS. Eight hundred dollars for 1 week?

Ms. BATES. For one team.

Senator HOLLINGS. [continuing]. For one team. And that consists of five students?

Ms. BATES. One adult, four students, and they are stationed at a college campus and that includes room and board.

Senator HOLLINGS. That sounds expensive.

But let me understand, Miss Hawk, again exactly what happens. Now, the five come into these different sessions during the summertime, you say?

Miss HAWK. During the summer, they spend a week at the college campus, and they take these courses, and they make the action plans for their schools to follow. And then when they come back home, they implement the action plans that they made at Teen Institute.

THE RIGHT TRACK

Senator **Hollings**. Sounds like the Governor's school that they have at the college during the summertime. Can you give the subcommittee, please, Ms. Lothery, the Right Track, just exactly the workings of that program for the record.

Ms. **Lothery**. The Right Track Program is an early intervention and treatment program for adolescents and their families. We get referrals from the department of youth services, from Charleston County School District, from private schools, and from parents. We also get some young people who have completed the program who encourage other friends to come to us for treatment.

And what we do is have the family come in for a very expensive and thorough assessment so that we can determine the extent of the drug use and other family problems which may have a contribution to their use of substances. After they have completed their assessment, we staff the case and our treatment team will provide recommendations to the family about what we feel that young person and/or other family members need to do to best help this young person.

We have an educational group that is 8 weeks long. It meets 1½ hours a week, and here they learn factual information about chemical dependency, about alcohol, about marijuana, and various other substances. We also talk about the effects of chemical dependency on the family. Many of the young people that we see have family members who are substance abusers and are very bruised and damaged by that family situation. We also as part of the educational group will help them to take and instead of trying to tell them what their problem is and that they have a problem, we try to set it up so that they can discover that for themselves. And they are tested regularly, given a urinalysis test, and that way we can help to promote their honesty with themselves and with us. If they have a dirty urine, we bring them in with their parents, not taking a punitive approach but a therapeutic approach, and ask them what does this say to you about your use of substances?

Because most of them upon entering the program will say that they don't have a problem, and they can stop using. And I believe that they mean that when they first come in. Chemical dependency is, or heavy substance use, is a very complex, complex disease, and it is very difficult for 15-, 16-, 17-year-olds, we have even had a 14-year-old who was a full blown alcoholic to accept that they cannot control their use of alcohol and/or other drugs.

So we are trying to help them assess that for themselves as well as our professional staff assess that as they complete the educational group. If we feel that it would benefit the family for them to come in for family counseling, multiple family counseling, then we recommend that. This has been extremely effective. Many families have a very difficult time communicating with one another. They have—some of the parents have felt like pulling their hair out in dealing with some of this atypical or typical adolescent behavior. So we help parents learn strategies to deal with their adolescent's behavior. Some families have family meetings now and try to open their channels of communication with one another. Family members can identify their expectations of one another and then again work on that in a treatment setting. We also do group therapy with just adolescents, and a multiple family therapy group, where several families come in for therapy, and they learn from one another.

PARTICIPATION IN THE RIGHT TRACK

Senator HOLLINGS. It's detailed, it's involved, it's personalized, and thereby, I guess, costly.

Where do you get your money, and how many are really involved in the Right Track? How many have been treated successfully let's say in a year with this approach?

Ms. LOTHERY. Success is relative in dealing with adolescent substance use. We roughly see about 225 adolescents and families per year.

Senator HOLLINGS. That's in the State?

Ms. LOTHERY. In Charleston County.

Senator HOLLINGS. Just in Charleston County?

Ms. LOTHERY. Just in Charleston County.

Senator HOLLINGS. About 225?

Ms. LOTHERY. Actually I think that that's extremely low. I have been into high schools and middle schools, have a pretty good feel for the substance use, and I think it's much more widespread. I think that we should have a warehouse to run this program, if we were getting all of the appropriate referrals that we should get. And I think we are not getting them early enough. I think that too much time is spent trying to confirm that a child is using substances, and by that time, they may be in over their head. So the treatment is much more costly. It takes a lot more time and effort on the family's part and on the adolescent's part, and it is very heartbreaking for the family. Sometimes it reaches a point of no return. And the adolescent has to pay for painful consequences before the family and/or the adolescent can accept the fact.

Senator HOLLINGS. Is that a lack of awareness by the community or within the schools of the availability of your program?

Ms. LOTHERY. I think in part that is true, because we do not have the funding to promote our program professionally. We don't have the funds for a professional brochure. We don't have business cards. It makes it very difficult to get the word out, although we have a very close relationship with the school district and do fairly extensive training with guidance counselors, teachers, and administrators.

I think that we also need to do training with the judicial system and other youth service agencies so that they can understand. For example, if at a group home here in Charleston County for adolescents, one of the young people in that group home is found with a bottle of vodka, and the bottle of vodka is one-half gone, that doesn't have the same impact on the staff that work there as what it would tell us in looking at an extensive history of that young person. And to us, that's a major red flag. They may just identify it as another incident of acting out.

Senator HOLLINGS. Mh-hmm.

Ms. LOTHERY. So there needs to be further training. To get back to your original question, our funding comes through the South

Carolina Commission on Alcohol and Drug Abuse. And yet we have within my department experienced a loss of two staff positions in the last 6 months, which has placed us in a very difficult position at times in delivering treatment services. The program itself for the assessment, the educational group, and the adolescent therapy group, those services are free, but when you get into cases where it's more involved and complicated and requires individual, group, or family therapy, then we have the fees which I mentioned earlier—$40 per session for individual and $24 for multiple family and $40 for family counseling sessions. So for those families who are resistant to it, parents not wanting to believe that their son or daughter actually has a problem that's that serious, and that's part of the denial of chemical dependency, as well as the adolescent promising that he will never use again, then they want to give their child the benefit of the doubt. And if there's a barrier with the financial payment, then all too often, they pull the child out of the treatment process, but what we have seen is that they re-entered the system after they had had more serious consequences as a result of their continued use.

Senator HOLLINGS. Well, that's very impressive, and each of you have made a valuable contribution to our committee's work. We appreciate it.

Are there any comments any of you wish to make further? We'll leave the record open, as I stated, for other questions, and we do appreciate your appearance here this afternoon.

Thank you very much.

Dr. BURKE. May I clarify something?

Senator HOLLINGS. Yes, sir.

Dr. BURKE. We have talked about the cost and number of officers to expand the DARE Program. If we expanded it to the kindergarten through grade 8, it would take 48 officers, and figure that at $30,000 a year, that would be $1.4 million.

Senator HOLLINGS. $1.4 million. Well, that's what we are trying to do is get a grasp of it, because is it working. I am sure Miss Hawk's program is working, and Ms. Lothery, the treatment, you see the need, and we know we have a problem when all the law enforcement officers come in and they testify for what you folks are doing. We need more of it.

Dr. BURKE. You have heard from people here in the group from law enforcement. These are people that are trying to do things, but I think that we need a general understanding in the Charleston community that we have a problem. And I don't think that there's a general understanding that there is a problem, and it isn't just with young people, it's with adults as well. I don't have a solution for that, but I do see it as a method to be addressed.

Senator HOLLINGS. There is no doubt, Dr. Burke, that we don't have an understanding in the State. And you hear, I mean fine sheriffs, chiefs of police, solicitors, all working around the clock, and I mean they are smart and they are capable and doing their best. But, like Miss Stewart here has said, we have got 8 DARE officers and how many we need, at least 15 more DARE officers? It's a frustration. And they are all asking, they hate to ask for more money and more manpower but there's a lack of appreciation of need in South Carolina. I plead guilty.

DEMAND REDUCTION

I knew we had some good work going on. I wanted to get it in the record, substantiate what we have been trying to do, because for years we have been trying to turn this ship around and get into the demand side. Let's get into drug education. We have gone from 1986 to this last year from $2 million to $500 million. So we are beginning with $500 million. I thought maybe by now we could really see some results, but we are not going to see any results until we treble or quadruple that amount, because the problem is far more extensive than people realize in South Carolina.

Dr. BURKE. We commend you for your interest and your involvement with us so we had an opportunity to say what we thought about the problem.

Senator HOLLINGS. Yes, sir; well, I agree. I am tired of losing. I have been 20 years on this subcommittee, 10 years as the chairman, and I am hearing the same thing up in Washington, so I figured we would come down to the front line. And, I do appreciate what you have said.

Yes, ma'am.

Ms. LOTHERY. I would like to say one thing, also. I think that it's going to take comprehensive prevention programs such as DARE, such as Teen Institute, comprehensive drug education curricula in the schools and innovative prevention projects coupled with a strong treatment program. If we are not available to help the young people who do get into trouble, then we are losing too many young lives who will become dropouts, who are dropping out of school, who have little ambition, and who are going to end up in our prison system.

TREATMENT PROGRAMS IN RURAL AREAS

Senator HOLLINGS. Well, we got the metropolitan area here, and we got the treatment. What about in the rural areas? We were listening to some of those involved in the small towns, the small counties. If I went down to Jasper, Allendale, and Hampton, would I find this kind of treatment available?

Ms. LOTHERY. You would find a School Intervention Program available, but it would not have many of the program offerings that we offer here in Charleston, because their budget is not as large as our budget. And in terms of intensive outpatient treatment, we are the only county in the State that has the State funded intensive outpatient treatment. That program meets 3 nights a week, a minimum of 12 hours per week, and this is the step in between the Right Track and Morris Village, in other words. And that as far as I know, we may be the only intensive outpatient treatment program that is still operating in the State. So that has been another project that has been implemented in the last 2½ years to try to address this. But you are absolutely correct in understanding that in the rural areas, they just don't have the available services that they need. It's true in McClellanville. It's true in Wadmalaw Island. It's true in Adams Run, Yonges Island.

I have one staff person who does prevention programming in the Sea Islands and McClellanville area, and he could work 24 hours a day, 7 days a week and still not get around to all the requests for services that are made to him. And he's making head way. He's doing very innovative projects, but there's got to be more. We are just beginning to scratch the surface.

Senator HOLLINGS. Well, we are lucky for the happenings in Europe today. We got a national catastrophe and a war right here on our own hands right at home. The entire community is the front line, not just the school, not just law enforcement or whatever, it is in the family. It is at every level and at every age group that I can find. And it is eating us alive. Can you imagine the billions of dollars that are going in there and what's going to have to occur to change it around.

When our generation came along, everybody was smoking, and the first thing they would give you on an airplane was a pack of cigarettes. Now, it's a violation to even smoke on a plane. That's as a result of education. But it took us 15 to 20 years for our generation to learn it. I hope with your leadership, your generation will come along and we won't have this demand for illicit drugs.

As chief law enforcement officer 30 years ago, I never heard of a drug case. We never had them. We were working on safe cracking.

Yes, ma'am, Ms. Bates.

Ms. BATES. I'd like to thank you for being here, but I would like to say that I think our programs are working. I feel really positive. I have seen the difference in just 5 years, and this is before the drug-free schools. We had a minimal amount of moneys to go in on an activity base. You talk to the students now, I go in and talk to them.

Senator HOLLINGS. You can already tell the results, right?

Ms. BATES. Not a result. I have seen an improvement. Someone asked me the other day, Candy, do your programs work? We don't know really. We won't know for 15 years possibly, about when they get to be Ann's age, but we are heavy, heavy, heavy into prevention from K through 5, and I feel and I believe that our school district is trying to work from a prevention base and working closely with the community agencies.

We are very fortunate in Charleston to have the kind of rapport we have with people like Linda Lothery, the substance abuse commission, but most counties, and I have been in other counties in the State, it's a pull apart, and we work together and with the police officers. We had the first DARE Program in the State through the grant. We were able to take and send Jan to California for training her, and from that it's a snowball effect. That's less than 3 years ago. Of course, I wanted to dream about our district having DARE implemented countywide in 2 years. It's going to be probably 5 years before we get it countywide, but we are setting goals, and that's a lot more than they did in the schools when I was growing up.

Senator HOLLINGS. It's way better expended rather than building jails and courthouses.

Ms. BATES. Right.

Senator HOLLINGS. Thank you very, very much.

[A brief recess was taken.]

STATEMENT OF CHARLES LEE YOUNG, EXECUTIVE DIRECTOR, CIRCLE PARK FAMILY COUNSELING AND ADDICTION SERVICES

Senator HOLLINGS. We are pleased to have Mr. Charles D. Young, the director of the Circle Park Family Counseling and Addiction Services; Dr. James C. Ballenger, professor and chairman at the Medical University of South Carolina [MUSC]; Dave M. Hiers, the director of the Lowcountry Commission on Alcohol and Drug Abuse; and Dr. Margaret Greer of the Vince Mosley Clinic.

Let's start over here on my left then first, Mr. Young.

Mr. YOUNG. Thank you, Senator.

As you said, my name is Charles Young, and I am the director of Circle Park Family Counseling and Addiction Services.

Just as a preliminary, I have been in the alcohol and drug field for 22 years. For 5 years I directed the Palmetto Center, which was the only inpatient treatment center for addiction in the State until some others did the same. For the last 17 years, I have been in my present job. And I come to talk about some unique things that we are doing interfacing the public and private sectors, primarily what the program I operate is known for. We operate the largest, most comprensive alcohol and drug program under one roof in the State. And we have done that, because we have interfaced with the private sector and been able to multiply our moneys.

We began our history back in 1973 when the statewide alcohol and drug system was created, and we were known then as the Florence County Commission on Alcohol and Drug Abuse. And in the ensuing 17 years, we have been able to multiply our funding by turning to the private sector. We started 100 percent federally and State funded, and now we are only 36 percent governmentally funded. And so we are a hybrid kind of agency that does everything the 301 system does, but, in addition, does some things at the free enterprise level with interface.

Some of the things that we operate in the building include a prevention program for every grade level. In that effort is the Teen Institute. We manage the South Carolina Teen Institute through a contract from Jerry McCord and the State commission on alcohol and drug abuse. So I was interested in the comments in the panel before related to that, and after I finish my statement, when we get into the discussion part, if there's anything specifically about the management and operation and cost, I would be happy to go into detail with you.

I will say that this summer we will be doing three separate Teen Institutes with 55 teams each, and that will allow 82 percent of the State's high schools to participate by sending a team.

We are delighted at that, especially since when we started in 1984 we only had 16 teams. So it has been a big part of our development.

The interface we have, and the reason I go into this, I think that interfacing, if you are the public sector and you interface with the private world out there, it's a way of multiplying the resources. This problem is too big to be handled with the public coffers alone, and it's too big to be handled by the private sources alone. And there's a need to unite the resources, both the manpower, financial, and capital, to try to make a dent in it.

The best example of how we have interfaced that I can give you is 5 years ago. We began operating under contract to a private hospital in Florence at that time a 30-bed addiction treatment facility known as Bruce Hall. We have since added 12 more beds specifically for adolescents giving us a 42-bed capacity.

We have done that with a pretty creative enterprise between both of us. My program, Circle Park, on the public side being a public agency, and a private hospital being, of course, in the private sector.

In any partnership—both parties have to bring their strengths to make it stronger than what you would have in isolation.

The strength that the public sector has, in addition, is the experience with this problem. The public sector has been around a lot longer than the private in terms of gaining experience and gaining a staff that has expertise, because the private side didn't get involved with it until it became profitable or became at least a break-even proposition, and that has only been within the last 10 or 12 years.

The public side in South Carolina, as you know, I think you were somewhere around in 1962 when the first public treatment program was begun, Commerce Center in Florence, and you had a lot to do with that, Senator.

Senator HOLLINGS. Well, that's very interesting, because we have a doctor friend who recently retired, Dr. Altman. When I got out of law school, we used to socialize with all the young doctors. We decided something ought to be done with alcoholics. And so we got doctors, and the doctors didn't want to fool with the morals of a generation of alcoholism, because they felt it was just a morals problem and it wasn't a medical problem. It was a dead end for them as far as treatment.

So we got some doctors at the medical college, as we called it at that time, that would volunteer, and we would get the War Assets Facility over at Fort Johnson, which is now a Marine Science Center. So I went to Gov. James Byrnes, and Mr. Jimmy was really one of my peers, and I said, "Governor, we got to start something," and I went into it. And he was absolutely convinced, I can see him now, he said, "Here's the solution, that bonded bourbon liquor," he says, "You don't ever drink Corby's and James Walsh and that stuff that's inferior. If you get bonded bourbon," he said, "You will never get drunk or become an alcoholic." He said, "No use to waste time and money on a center like that."

Now, that fellow was on our supreme court, secretary of State and Governor of the State and everything that we ever had in South Carolina, but he firmly believed that about alcoholism. So, I had to wait to get into office myself to start the Mead Center.

I said we still got to do it, and Florence did, and now we know a lot more about it as the witnesses will testify, but we appreciate your participation and leadership.

Mr. YOUNG. Yes, sir; thank you.

What we have done with the pooling of these resources is we had the ready made staff, we had years of experience, we knew how to design a treatment program. We were highly interested in holding down costs.

I worked for a long time in this field and worked hard to try to get third-party insurance to cover addiction, much as it would any other health care. I think you can do quality treatment and keep the price down to where it can be affordable and attainable. So we went at Bruce Hall with that approach and the hospital that we are affiliated with, did what they did best. They operated beds best. They have facilities. They had the capital, which we didn't have on the public side to build facilities. They were able to supply the medical personnel, the janitorial, the food service, all the things that they could do best. And by uniting we have come up with the lowest cost private inpatient treatment facility in the State, and we are quite proud of our record, and we are getting ready to have our fifth birthday here this month.

And that kind of relationship has been good for them in that we were able to know how to market and attract patients into a facility for treatment. We knew how to come up with a low-cost program, and at the same time the benefit for us was a profit motive that we could in turn take what we earned from it as a public entity and put it into the prevention programming and other things to serve people who couldn't afford to pay on the public side as a way of multiplying our public money. And I am real particular with what we have achieved. It's a novel idea even across the country as we have looked at it.

The second way that we have intended to do that is we have marketed and sold employee assistance programs to companies in Florence County. So now we have a little over 15 percent of the county's work force covered by a program that the industry pays us to train their supervisors, to identify the department employees, to consult with them on drug testing and other means of identifying the employees, and then to do the assessment and the treatment to get them back on their feet and they not lose a valuable employee that they have spent a bunch of money in training and in years of seniority.

The pooling of resources also has occurred with us at the prevention level, not having a lot of money in prevention. You know, prevention has been something that people have given lip service to, but in terms of dollars, a disproportionate share of the dollars have always gone into treatment rather than pure prevention. It's because we have got an emergency in treatment. We try to put our thumb in the hole in the dike, and we keep saying, well, next year we'll try to do something about prevention.

In the prevention arena, what we have done is something very similar to DARE, except we have gotten volunteers from the community and gotten and trained them over the summer, and they go in the school system for an entire semester, doing a program very similar to DARE with the same ideology and the same goals. And the only difference is that we have had a few law enforcement in Florence County to do it. We have two people that are doing the DARE Program, where if we could get 12 to 15 volunteers and do it in a community project, and while there is no money changing hands on that interface, the service that our volunteers give us, if you translated that and had to pay for it would be a lot of dollars. In it we got a little over 500 volunteer hours out of our cadre of volunteers just last year doing programs in schools.

So my point in coming, in closing with my statement is that there would never be enough public money to do this job. I wish there were. I don't think there will be. It's too big. We've got a trunk of the elephant, but if we can take what we have available publicly and magnify it by hooking up with our partners in the private sector, then we can get the job done quicker, and I think with a better quality product.

Thank you.

PREPARED STATEMENT

Senator HOLLINGS. Very good. We will place your statement in the record at this point.

[The statement follows:]

STATEMENT OF CHARLES LEE YOUNG

My name is Charles Lee Young. I have worked in the alcohol and drug abuse field for the past twenty-two years. I spent the first five years of my career as the Director of Palmetto Center, an inpatient treatment facility now operated by the South Carolina Department of Vocational Rehabilitation. For the past seventeen years, I have served as the Executive Director of Circle Park—Family Counseling and Addiction Services in Florence, South Carolina.

Circle Park is the operational name of the Florence County Commission on Alcohol and Drug Abuse. Created in 1973 and charged with the responsibility of planning and development alcohol and drug abuse services, the Commission has grown from a small planning unit to a comprehensive network of services which address virtually every facet of the problem.

Programs and services provided include outpatient, intensive outpatient (day treatment) and inpatient treatment; a 10-bed halfway house; a full range of early intervention programs including those directed at driving-under-the-influence, public offenders, and problemed students; employee assistance programs; and a prevention program which includes a school based program, community education, an adventure program and the South Carolina Teen Institute for Alcohol and Drug Abuse Prevention.

The Teen Institute is South Carolina's largest single prevention effort, and reaches approximately 80 percent of South Carolina's high schools by providing an intensive week of training to a team of students and faculty, who in turn, implement programs in their respective schools.

Circle Park has distinguished itself in several ways. It offers the most extensive range of services in one location of any alcohol and drug abuse program in South Carolina. It is also known throughout the state for its leadership in developing prevention, early intervention and treatment services. However, the greatest distinction is the degree to which the program has become self-supportive as a result of its interface with the private sector.

This interface or partnership has resulted in the evolution of Circle Park from a 100-percent governmentally-supported entity in 1973 to one which derived only 35.6 percent of its revenues from public sources in 1989. It has produced first class facilities, generated community support, allowed for improved pay scales for employees and provided the flexibility inherent in operating as a business as opposed to a pure governmental entity.

Circle Park is noted for its interface in two major areas: the operation of a private inpatient program through a contractual relationship with a local hospital and for its employee assistance programs with business and industry.

These interfaces occurred for the same reasons that any partnership evolves: namely, because each party in the relationship had a unique strength or asset to contribute; resulting in a greater whole than the sum of its parts.

A model of public-private interface is Bruce Hall—Center for the Treatment of Chemical Dependency. Bruce Hall is a private inpatient program operated by the Bruce Hospital System, Inc. in cooperation with Circle Park. Through a contractual relationship, Circle Park supplies management, clinical staff and support personnel. The Bruce Hospital System contributes medical personnel, food service, marketing, custodial/maintenance services, physical facilities and operational costs.

The Program offers detoxification and a long-term rehabilitation program for both adults and adolescents. The Adult Program (established in 1985) accommodates 24 patients, and the Adolescent Unit (which opened in June 1989) accommodates 12 patients. Six beds in the detoxification unit create a total capacity of 42 beds.

Aside from the unique features of its treatment approach, Bruce Hall has the distinction of being the only private treatment program in South Carolina created out of public-private interface, and it is the least costly of the private programs in South Carolina. The cost containment was achieved without sacrifice of the quality of staff, program content, physical facilities or amenities; but rather, as a direct result of public-private interface.

In the case of Bruce Hall, Circle Park brought a knowledge of addictive illness, an 11-year track record of delivering quality services, a ready-made cadre of trained professionals with which to staff the program, the expertise needed to design a quality program and access to the State Alcohol and Drug Abuse System. The Bruce Hospital System, Inc. supplied capital assets, access to private sources of payment for services (including health insurance and other third party coverage) and linkage with the Health Care System.

The relationship has resulted in a level of occupancy necessary to hold down program fees; and yet, has generated revenues for Circle Park which can be used to create other needed programs and to reduce reliance on governmental sources.

Last year, all of the programs of Circle Park including Bruce Hall were co-located into a 57,000 square foot facility known as McKenzie Park. Thus from one location, individuals and families are able to receive a full range of services including: detoxification, inpatient treatment, intervention, family services and outpatient counseling. The benefits in terms of continuity of care and follow-up are immeasurable, and these benefits can be directly traced to public-private interface.

The employee assistance programs operated by Circle Park, in cooperation with area business and industry, represent another level of public-private interface. These programs work through a contractual relationship wherein Circle Park provides supervisory training, technical assistance, assessment of problemed employees and counseling services designed to restore work performance to an acceptable level.

Last year, approximately 10 percent of Florence County's total work force was covered by an employee assistance program through Circle Park. The private sector benefits include having an alternative to losing valued employees and the cost savings involved in improved performance. The public sector benefits include the value associated with early detection/treatment and prevention of further deterioration through intervention on the job.

In terms of the reduction of alcohol and drug abuse, particularly its impact upon the work place, the public-private employee assistance program interface is significant.

In summary, the alcohol and drug problem in this country has escalated to the point that it cannot be solved by the public and private sectors working in isolation from each other. The pooling of public and private resources for mutual benefit is a reality in Florence, South Carolina and an idea deserving replication in other areas.

STATEMENT OF MARGARET K. GREER, PH.D., INSTRUCTOR OF PEDIATRICS, DIVISION OF DEVELOPMENTAL DISABILITIES, MEDICAL UNIVERSITY OF SOUTH CAROLINA

Senator **Hollings**. Dr. Greer, we welcome you and appreciate your appearance here today.

Dr. **Greer**. Thank you. It's an honor to be here.

I want to address the drug crisis facing this Nation, and in particular the State of South Carolina.

Traditionally, drug abuse education, prevention, and treatment has focused on the abuser. But today I would like to call attention to the needs of the offspring of the abuser. Children's neurological development is impacted negatively by exposure to drugs in at least two major ways: First, prenatal drug exposure is harmful to the developing brain; and, second, parental drug use is hazardous to parenting skills and abilities.

Prenatal exposure to cocaine results in an increased incidence of premature and/or small for gestational age babies, in babies with underdeveloped brains and in hypertensive and vascular accidents within the developing brain. These infants are also additionally at risk for sudden infant death syndrome, neglect, and abuse. Prenatal exposure to narcotics produces narcotic abstinence syndrome, transitory delays in motor development, and a variety of feeding difficulties. Long-term neurobehavioral effects have not really been clearly defined, but many children exhibit deficits of attention and impulse control, organizational skills, adaptive behavior, and expressive language. These infants are also significantly at risk for HIV exposure and subsequent infection. About 77 percent of all children with AIDS have acquired the virus at birth through an infected mother. And 55 percent of these mothers have acquired the HIV infection through IV drug use.

In addition to these direct toxic effects on the developing brain, drug abuse impacts negatively on parenting skills. Drug-abusing mothers are often described as impulsive, immature, and impatient. And as a group these mothers perform significantly lower on measures of intelligence, personality, and parenting skills. Family dynamics often involve rejection and lack of emotional warmth. These mothers experience difficulty providing structure and often resort to negative and aversive methods of behavioral control.

The Medical University of South Carolina recognized a significant increase in cocaine-abusing pregnant women in 1988. During that year, it was established that 40 percent of the pregnant women screened had drug positive urine tests.

With this rise in prenatal illicit drug exposure, the MUSC division of developmental disabilities at the Vince Mosley Clinic has seen a dramatic increase in children with learning and behavior dysfunction as an apparent result of prenatal drug exposure and subsequent chaotic family situations. Although the exact number of these special needs children is not yet known, it is estimated that in excess of 1,000 fetal drug-exposed children will be born each year in the Charleston area.

Education, prevention, and treatment in the war against drugs must take many forms to adequately address this problem. Education means identification and intervention knowledge for professionals and improved parenting skills for the family. Prevention means supplying the child and family with methods to avoid the severe emotional and behavioral dysfunction that can be involved in this population. Treatment means supplying families and communities with new strategies to promote child development and parenting skills within populations with a history of drug abuse.

Education at the medical university is designed to prepare professionals with the knowledge and ability required in dealing with these special at-risk populations, such as those with chronic neurologically based handicapping conditions as a result of fetal drug exposure. To address intervention and prevention, the division of developmental disabilities is currently involved in interdisciplinary diagnostic, educational, and prescriptive plans. Within MUSC pediatrics, both developmental disabilities and neonatology have joined forces so that they can track and identify these children through a neonatal high risk followup clinic.

To expand treatment efforts, MUSC developmental disabilities has recently developed two pilot programs with educational objectives and promoting effective parenting skills amongst substance abusing parents and providing family support and intervention for pediatric AIDS patients.

It is imperative that education, prevention, and treatment be considered in relation to postdrug exposure. The support needs for the infant and the family are significant and require attention in order to best facilitate movement in a positive direction. The cognitive, behavioral, and emotional development of these drug-exposed children is severely at risk without proper identification and intervention.

DRUG ADDICTED BABIES

Senator HOLLINGS. The 1,000 you say of 40 percent tested in 1988, they showed some drug addiction?

Dr. GREER. They had drug positive urine tests, 40 percent of the women.

Senator HOLLINGS. Just what does that mean—how many drug addicted children—now you said 1,000 children born in Charleston?

Dr. GREER. If we look at the current rate and look at 40 percent of the births at MUSC, a conservative estimate would be 1,000 births a year that would be drug exposed.

Senator HOLLINGS. Drug exposed. Let's elaborate on that so the lay person like myself understands what you are saying.

Is that a drug-addicted baby?

Dr. GREER. Not necessarily. We know with the 40 percent that we did identify that they were consuming illicit drugs at one point or another. The difficulty in tracking these pregnant women that are drug abusers is that they traditionally do not come for routine prenatal care. We often see them when they are delivering prematurely, so our estimates when we look at the difficulty tracking these women and locating these women is extremely conservative. We know that at least 40 percent are cocaine abusing at one time during their pregnancy. As far as how consistent that is throughout their pregnancy, we often have to rely on the report.

Senator HOLLINGS. But medically what do I have on my hands in the infant from that mother?

Is that infant itself addicted, or I understand the lack of ability to concentrate and educatability and the learning curve, and what have you. But medically speaking, what have I got when you say the infant has been drug exposed?

Dr. GREER. The majority have not been drug addicted, but they have been premature, low birth weight, cerebrovascular accidents in the brain, hemhorraging in the brain.

Senator HOLLINGS. What percentage would be really other than, I know the prematurity, but you can get by that. If you have got brain damage, you are not going to get by that easily.

Dr. GREER. We are not going to be able to reverse that.

Senator HOLLINGS. That's what I mean. How many then would have some kind of permanence of ailment, addiction, injury of some kind? Of that 1,000, I am trying to get not just the exposed but who is injured as a result of the mother's drug use? How many really are hurt as we know it in that 1,000?

Dr. GREER. It's very difficult to say because even some of the largest studies done in this country are looking at fetal cocaine syndrome in 3-year-olds, and that's not a very long tracking period. So we don't know exactly what's going to happen to the children later.

Certainly all those 1,000 plus babies would be at risk for some type of learning difficulty.

In addition to the risks that they suffer from their exposure prenatally to illicit drugs with the chaotic family situation, the risk of abuse, et cetera, they are doubling the risk.

Senator **HOLLINGS**. I am trying to tell my Rotary Club friends what society has adopted by not getting into prevention, by not getting into the treatment, by not giving the education in the schools and Teen Institute and their programs and everything else. If you don't do these things, these problems are only going to accelerate and exacerbate, and that 1,000 will be up, up and away and if they think they're saving money by not making this commitment, they are not at all. You are going to be spending it at the medical end for that child the rest of its life.

Dr. **GREER**. Significantly. And if we don't intervene with that mother, baby No. 2 is going to come along that's also cocaine exposed or narcotic exposed.

PREPARED STATEMENT

Senator **HOLLINGS**. Thank you very much. We will insert your statement in the record at this point.

[The statement follows:]

STATEMENT OF MARGARET K. GREER

It is an honor to testify before the Senate Appropriations Subcommittee on Commerce, Justice, State, and the Judiciary on the topic of the drug crisis facing this nation, and in particular the state of South Carolina. Drug use in adolescent mothers has increased significantly over recent years, with estimates of prolonged use of alcohol approaching 84%, 62% for marijuana, and 23% for cocaine in some areas of this nation. These same young mothers are three times more likely to have a male partner who uses marijuana or cocaine, which in turn leads to cumulative detrimental risks for the child and family situation.

Traditionally, drug abuse education, prevention, and treatment has focused on the abuser. Today, I would like to address the needs of the offspring of the abuser. Children's neurological development (neurodevelopment) is impacted negatively by exposure to drugs in at least two major ways. First, prenatal drug exposure is harmful to the developing brain. Second, parental drug use is hazardous to parenting skills and abilities.

As an example of the negative impact drug abuse has on the developing brain, let us briefly examine the effect which cocaine has on the developing brain. Prenatal exposure to cocaine results in an increased incidence of premature and/or small for gestational age babies, in babies with underdeveloped brains (microcephaly), and in hypertensive vascular accidents within the developing brain. These infants are additionally at significant risk for sudden infant death syndrome, neglect, and abuse.

Prenatal exposure to narcotics produces neurobehavioral disturbances obvious within the first 24 hours, but extending at least through the first year of life. Included in these are narcotic abstinence syndrome, transitory delays in motor development, and a variety of feeding difficulties. Long-term neurobehavioral effects have not been clearly defined, but many children exhibit deficits of attention and impulse control and have poor organizational skills as compared to their peers. They often display poor social/adaptive skills, delayed expressive language, developmentally inappropriate motor activity (hyperactivity), and limited perseverance. These infants are also significantly at risk for HIV exposure and subsequent infection. Seventy-seven percent of all children with AIDS have acquired the virus through birth to an infected mother, and 55% of these mothers have acquired the HIV infection through IV drug abuse.

In addition to these direct toxic effects on the developing brain, drug abuse in the parents portends poorly for their development of effective parenting skills. Drug-abusing mothers may be described as self-centered, impulsive, immature, and impatient. As a group these mothers perform significantly lower than their nondrug-addicted peers on measures of intelligence, personality, and parenting skills. Family dynamics often involve rejection and lack of emotional warmth. They experience difficulty providing structure in their home and they lack achievement orientation for self and other family members. As a result they resort to methods of behavioral control for their children that frequently consist of negative, aversive techniques.

The Medical University of South Carolina recognized a significant increase in cocaine-abusing pregnant women in 1988. During that year, urine screens positive for cocaine increased from 3 to 15 per month. Lack of prenatal care visits and increased incidence of fetal loss in cocaine-abusing women as well as urine screen limitations has contributed to conservative estimates of frequency of use. Despite these hurdles to incidence assessments, the Medical University of South Carolina established that 40% of pregnant women screened had drug-positive urine tests.

With this rise in prenatal illicit drug exposure, the MUSC

Division of Developmental Disabilities has seen a dramatic increase in children with learning and behavioral dysfunction as an apparent result of prenatal drug exposure and subsequent chaotic family situations. Although the exact number of these special needs children is not yet known, it is estimated that with the present number of positive prenatal drug screens, in excess of 1000 fetal drug-exposed children will be born each year in the Charleston area.

Education, prevention, and treatment in the war against drugs must take many forms to adequately attack this problem. Within the MUSC Division of Developmental Disabilities, education means improved identification and intervention knowledge for professionals and improved parenting skills for the family. Prevention means supplying the child and family with methods to avoid the severe emotional and behavioral sequela that can be involved in this population. Treatment means supplying families and communities with new strategies to promote child development and parenting skills within populations with a history of drug abuse.

In order to properly accomplish these goals within this at-risk population, we within the Division of Developmental Disabilities at MUSC believe that drug-exposed children and their families will require interdisciplinary diagnostic, educational, and prescriptive team approaches. Within MUSC Pediatrics, the Division of Developmental Disabilities and the Division of Neonatology have joined forces in identifying and tracking these children through a neonatal high risk follow-up clinic. Our diagnostic team conducts these evaluations, determines diagnoses, recognizes developmental concerns, and designs individualized treatment plans. These plans are carried out through the cooperative efforts of the Division of Developmental Disabilities and related State agencies such as the Department of Mental Retardation, the Department of Mental Health, the Department of Education, and the Department of Health and Environmental control. These interagency collaborative efforts have enabled two distinct types of intervention: (1) home intervention programs to provide a family-centered approach to developmental needs and family interactions and (2) structured preschool programs to provide early educational services, as well as other intervention strategies such as speech/language therapy, occupational therapy, physical therapy, etc.

It should also be recognized that a more dramatic intervention plan may be necessary during possible in-patient parental drug-abuse treatment and inevitable family crises, and this can be met through respite care programs. Such programs are available in South Carolina through the Department of Mental Retardation and local mental retardation boards, but these may be limited in that all children of drug-abusing parents may not meet the eligibility requirements. This may pose a need for additional services in the very near future.

Education at the Medical University, in the form of classroom instruction and workshop presentations, is directed toward physician residents, psychologists, educators, and a wide variety of other health care personnel. This educational program is designed to equip professionals with the knowledge and abilities required when dealing with special at-risk populations, such as those with chronic neurologically-based handicapping conditions. To further educate these professionals in the knowledge and abilities required when dealing with drug-abusing populations, an addiction specialist, funded jointly by MUSC and the South Carolina Commission on Alcohol and Drug Abuse, is actively engaged in these educational efforts. To expand its intervention and prevention efforts, the Division of Developmental Disabilities at MUSC has recently developed two pilot programs with the educational objectives of promoting effective parenting skills among substance-abusing parents and providing family support and intervention for pediatric AIDS patients. To extend its research efforts, the Division of

Developmental Disabilities is also in the process of recruiting professionals in a second basic area of research: substance abuse and developmental outcome.

It is imperative that education, prevention, and treatment be considered in relation to post-drug exposure. The support needs for the infant and the family are significant and require attention in order to best facilitate movement in a positive direction. The cognitive, behavioral, and emotional development of these drug-exposed children is severely at risk without the proper identification and intervention.

STATEMENT OF JAMES C. BALLENGER, M.D., PROFESSOR AND CHAIRMAN, DEPARTMENT OF PSYCHIATRY AND BEHAVIORAL SCIENCES; AND DIRECTOR, INSTITUTE OF PSYCHIATRY, MEDICAL UNIVERSITY OF SOUTH CAROLINA

Senator HOLLINGS. Dr. Ballenger, go right ahead.

Dr. BALLENGER. I think there is another ticking time bomb we just don't know about. You are quite right saying we don't know about the 3-year-old that grows up, too. One of the things that we have been worrying about in one of our research efforts is if you preexpose during the prenatal period, what the child is like as an adult. And some of the things that we see with both cocaine and amphetamine exposure during the fetal time is that it affects their dopamine system when they grow up in their brain. The dopamine system is very involved both in craving and subsequent drug addiction and other psychiatric problems. So one of the things we may see, maybe the reason why drug addiction is multigenerational, it could be something, we don't know that, but it could be the exposure while they are in the fetus, makes them predisposed emotionally and otherwise to be a drug addict themselves when they grow up.

GENETIC FACTOR IN ADDICTION

Senator HOLLINGS. That's what I am trying to get at.

I don't know, I play a game with myself. If I were Dr. Hollings, and obviously not being Dr. Hollings and no one asked, but if they were to ask me about an alcoholic, I could go back and show you somebody in that family that was an alcoholic before him. I just sort of play that side. I understand so and so, you know he's really in bad shape. And I have worked with tremendous pride with Alcoholics Anonymous and with you folks in psychiatry and everything else of that kind, but when I was working in the State hospital years ago, we had 5,000 patients in a factory, but 3,000 were alcoholics. They were not mentally ill, they were alcoholics. That's the way they used to treat them in the forties and early fifties until we started rewriting the laws and what have you.

Now, I am back to this, and I am finding that like you say the propensity then to become an addict is there. And then it's repeated generation after generation.

Dr. BALLENGER. We can identify, particularly in sons of alcoholics, that they are different biologically. They handle alcohol differently. They handle other drugs differently, and they are different, and so it's probably why they are vulnerable. And certainly the highest incidence when you can go back and find the relative, it's the son of a male alcoholic.

Dr. GREER. These drug-abusing mothers are also three times more likely to have a drug-abusing partner, so the child again, if both parties are in the home, there's a large chance that both are drug abusing.

DRUG USE AND SIDS

Senator HOLLINGS. Dr. Greer, I was intrigued by your comment on SIDS.

Is there really any connection to sudden infant death syndrome? Because, coming from the other end, a family with SIDS sits down with doctors and they all say they still don't know the cause. We have got research and everything else of that kind but the experts still are at a loss.

Yet, here I am hearing that there might be a connection to drug use.

Dr. GREER. There is a definite higher frequency of sudden infant death syndrome in these babies. Maybe some of those are more unexplained deaths due to neglect, or whatever, I am not sure, but we have seen a higher frequency. So we are at a greater risk of losing the children as well.

PRENATAL INTERVENTION

Senator HOLLINGS. And the solution to the problem as you see it is what?

Dr. GREER. Oh, educating the community, educating professionals that deal with the community, so we can identify these children, intervene as early as possible. We are privileged enough in the State to have three tertiary level diagnostic centers that are connected with medical schools.

So I think that's a good way for us to at least identify and hopefully track these children and to train other professionals to intervene. We also need to work on developing more pilot programs to see what is our best method of attack for these families. What is our best method of promoting that child's development.

Senator HOLLINGS. You find a hungry mother who is also poor, so they come in under the Women, Infants, and Children Feeding Program in order to prevent that child from having a brain deficiency at birth. WIC works, pays off. Is there any way to find an expectant mother on drugs and bring her in immediately and give her some kind of treatment, or is that in enough time?

Dr. GREER. I think anytime that we find the drug-abusing mother, that's enough time for us to intervene.

Certainly to offer services, to offer family support systems, to go ahead and set up maybe a home intervention program where someone would come out to the home and assist the mother to get her in a drug treatment program, to prepare for that child that's coming, so we are less at risk with the child. As we mentioned before, we can't reverse any brain damage that's already done, but we can certainly keep further brain damage from being done and possibly facilitate the development of that child once born.

Senator HOLLINGS. Very good.

Dr. Ballenger, we welcome you, and we appreciate your appearing here.

Dr. BALLENGER. Well, it's my pleasure, and I appreciate the opportunity to share with you my perspective.

You may find it a bit different from what you have heard in the last 2½ days, and I apologize if it is too academically, obviously academically oriented. But my perspective obviously does come from the fact that I chair the department of psychiatry and direct an institute of psychiatry.

SHORTCOMINGS IN TREATMENT

I would suggest to you that that perspective raises two issues that I have not—that I see every day, and I hadn't heard mentioned very much, and that is, I think it's distressing for us to practice psychiatry and medicine with such ineffective treatment. I think it's fair to say most of us in the field if we step back from it, we have to say somewhere around 50 to 70 percent of the people who get treatment, even good treatment, which is often not available and not widely available, even if they get good treatment, they don't benefit substantially from that treatment. I think it is the majority of the people.

I would also like to suggest from my perspective, if we are about a war, which I would really agree with you that we are, we need a lot of soldiers and we need a lot of lieutenants and we need colonels, and we don't have those. The number of people going into the substance abuse field as a life work is distressingly low for me. I will give you one example.

We thought it would be wise to have some fully trained psychiatrists who really learned about substance abuse and tried to provide leadership about this. And George Orvin and Jerry McCord helped us put this fellowship together. It was the first in the United States and had one trainee.

We did that several years ago. It's that level of a problem. We need thousands of people, and we are getting a handful going into the field.

My comments are directed at those two problems and a few others.

You asked me to orient my comments to what the response of the psychiatry department at MUSC ought to be and what we need to do that. And I would like to do that briefly and then answer any questions you have about that.

I think what our role ought to be to provide more leadership and some primary leadership in bringing the substance abuse field into the mainstream of the resources that are available to devote to this No. 1 health problem.

I think it's really poorly appreciated that this has not happened here or elsewhere or how far outside the traditional health care system and biomedical field the substance abuse field is. And one way to think about that is to realize the most effective treatment of the whole substance abuse field has been AA and the subsequent offshoots of AA like narcotics ANON. That whole system grew up outside the medical system. Quite on purpose the medical system had failed the substance abuser, as you had pointed out earlier yourself. It grew up and it is still outside the system. We try to relate to it, but it is still outside the system.

NEUROSCIENCES

That has led to several terrible problems at this point in time. The substance abuse field as a whole, now this is somewhat unfair, but it's mostly fair, I think most of us in the field would agree, it's been outside the field so that it does not benefit from the tremendous advances in neuroscience. The hottest field in science is brain science at this point. The advances in that area have really not been available to the substance abuse field. It's been outside of psychiatry. Psychiatry is finally coming back and taking its rightful responsibility in this area, but the revolution in psychiatry in the last 10 years has also not been available to the substance abuse field.

Just one example of that: A lot of studies now suggest that one-third, maybe even two-thirds don't have primary substance abuse problems, but that one-third or even a bit over the majority have a psychiatric problem and a substance abuse problem. In the current treatment system, the psychiatric problem is usually ignored or denied.

We see on a daily basis a manic depressive patient stabilized on lithium doing really great and gets into the other system and suggests they come off the lithium, because the two systems don't overlap. I think they should be mainstreamed.

Another good example is we now have evidence that about 20 to 30 percent of alcoholics start with panic disorder, severe anxiety, panic attacks, drink to try to manage the anxiety and then present and are treated as if they were a primary alcoholic when, in fact, they are not and they don't do as well.

NEED FOR RESEARCH

But you know the really biggest issue, the biggest loss to the field is that the substance abuse field has been out of the research stream.

The researchers and the resources are over here, and the field is over here. And the people who have been working so hard to treat substance abuse are in the main not researchers. So even though treatments have evolved, they have not been studied in the usual sort of way.

Fred Goodwin, who you know as the chief physician at ADAMHA, the Administrator, Fred and others have stated that if you are real honest about it, there is not a single treatment or prevention effort actually in the substance abuse field that has actually been studied. We could say, yes, this works, this doesn't work, or

A works better than B, or you should give patient Y treatment A but not B, this just has not happened, certainly not in any comprehensive way. And we are really delighted with Dr. Goodwin's leadership with his half of the strategy of the war on drugs.

The treatment half, he's been given a lot of responsibility in that, and he has said the primary strategy should be that as we, and the estimates have varied, but the administration has said they are going to spend $1.5 billion on the treatment side. Dr. Goodwin has said that all of that ought to be done in concert with the merger of treatment folks and research folks so to bring research folks from the more traditional fields via medicine and put them together with treatment, and so that we can research these efforts that we are currently doing and develop new treatments.

I think that's in the main what we should do at MUSC, Senator.

TREATMENT

I think we should radically expand, I mean radically expand the amount of treatment that we do in a complimentary fashion to what's already been done. For instance, to add programs for patients who have psychiatric problems and substance abuse problems are treated in so-called dual diagnosis patients. Those programs in the main don't exist in South Carolina.

To put together programs where people who have done poorly with traditional treatment, to try to find out how to work with somebody who has been in treatment four times and failed, those kind of complimentary programs. To put them in a setting where the quality and the visibility is so high that trainees want to get into the field. The recruiting issue of getting really quality people in, training them well is really a major issue.

So you put them together so that we can actually infuse the field with an army of new people who will work on the treatment end.

I think that setting ought to also have not clinicians but clinical researchers who are right there so that they study every single thing that we do, and bring new novel treatments very quickly to the fore and experiment in an aggressive sort of way. As you said, we are losing this war. I don't know how many years we have to wait around. I think we need an aggressive setting to bring new treatment, and there are lots and lots of promising treatments, but there has been poor support and maybe even more importantly so few people to do the work that we have good ideas but, you know, they take so long because we have so few people to do it.

I think we ought to have laboratory-based researchers that bring what the laboratory can bring. If you put all three together, the interchange between the three, treatment folks, clinical research folks, basically laboratory based research folks, the interchange between those three is immediate. It's exciting. It's stimulating. And the transfer between these three arenas can be done very rapidly.

As you know, that really is a model that the National Institutes of Health adopted, and that's what's led to all of the big breakthroughs. That's my experience at NIH, that is really the main issue why the NIH produces the best advances in health in the world is having all three arms right in the same setting across the hall from each other.

Now, it would be a little controversial further to say that most of us think that——

Senator HOLLINGS. When you say "us," which of the three are you?

Dr. BALLENGER. I am all three.

Senator HOLLINGS. That's what I thought.

Go ahead.

Dr. BALLENGER. We think that the definitive treatments, many of the definitive treatments really will come from a biologic side when we find out what's happening in the brain. I will give you an example if we have time about the cocaine receptor, the kind of idea I know you do know about is how that can work.

SUBSTANCE ABUSE RESEARCH CENTER

But to answer your other question which you asked me is what we need to do, I believe we should bring all this together and into a center for substance abuse research of the nature that I described—the three sides—and do that here at the medical university. And, I think the opportunity to do it now is very, very real for three or four reasons:

One, we have worked for the last 6 or 7 years to put together a structure which would really accommodate it quite well. The institute of psychiatry, it has taken us 7 years or so to build, and it now could provide an infrastructure of administration and even physical space and people to handle such a center quickly. So we wouldn't have to wait 5 years and lose the war altogether.

I think the second issue is that we have been successful in the department of psychiatry and elsewhere in the university, to begin to bring together the critical mass of people. In the last 5 or 6 years we have now about 20 people all of whom are financed doing other jobs, but 20 really talented people at different posts who could devote full time to this effort. So I think that's the second thing that makes it imminently possible.

I think the third effort is that MUSC's decision recently to get a PET scan on campus and place it in the institute of psychiatry complex, that is a huge boost. That is the biggest, most exciting technology in science today for figuring out what's happening in the brain.

You can see what's happening in the brain without hurting the patient at all. For instance, you can see what part of the brain is hurt or abnormal in an addict or somebody who is abusing drugs or where the drugs are working, or where if you create an antagonist to block where these drugs are acting. You can see where that's working.

Our decision at MUSC to do that is a critical link to this center and our proximity to the Savannah River plant that has essentially nuclear medicine in this case, the isotope ability makes us have a unique ability to do that. The real problem with that is getting the fancy isotope but being so close and so allied with the Savannah River plant would really help us.

So I think that what we really need is a couple years of support in getting it going, both in physical spaces and in operational funds, and then in 2 to 3 years I think it would be self supporting.

We can make money in many instances with these treatment programs either through third party or contracts to treat the people with the department of mental health, for instance, and stuff like that.

We also would be in an excellent position to get grants from the NIH and from the pharmaceutical industry, who is very, very interested in developing treatments for substance abuse. Since it's the most common health problem in the universe, they see a market there if we can have an effective treatment.

Now, Dr. Goodwin in his fourth visit in the last 18 months when he was down here 1 month ago, his summary statement to me was this is exactly the kind of site that we need, away from Washington where people are research oriented and treatment oriented and where you can merge the three things that I have proposed to merge. And I agree with Dr. Goodwin. That's why we built it that way. This is the next logical step. I think we can do it extremely well, and I will be glad to answer any questions you have about why I think it's worth doing, and what the opportunities are and, you know, how we might do it were we able to find the support.

Senator HOLLINGS. I find, I don't want to use the word jealousy, but I guess it comes as a form of competition for limited resources. You have the alcohol and drug abuse councils and all of our faith in the Lord instead of medicine—where AA is a sort of self discipline. As I have understood it, your emotional or psychiatric difficulties cause you to drink or cause you to go to drugs, but there's no medical treatment for that. So, we're trying to reach substance abusers through peer pressure and similar programs. Now, comes the doctors who say that they can research something and find the cause or treatment for alcoholism, but the fundamental belief of AA is that you are never going to be cured because there is no treatment, and you have got to believe and know that. That cleavage, that competition for the dollar runs right into each other. That's why they are not getting together. Am I right or wrong?

Dr. BALLENGER. I think you are right, but I would be glad to share my notions with you about that.

PREPARED STATEMENT

Senator HOLLINGS. All right. Your statement will be included in the record at this point.

[The statement follows:]

STATEMENT OF JAMES C. BALLENGER

Introduction

I want to thank the Committee for allowing me the opportunity to share my perspectives on the drug abuse problem in South Carolina and the appropriate Federal response to this issue. My comments obviously come from my perspective as Chairman of the Department of Psychiatry and Director of the Institute of Psychiatry here in Charleston. My responsibilities include the development of appropriate and effective clinical treatments for substance abuse and therefore I am confronted everyday with the marked deficiencies in current treatments and treatment resources. I am also responsible for developing training programs for the professionals who will treat patients with substance abuse, including the undergraduate training of physicians, graduate training of psychiatrists and physicians in other fields, and psychologists, and social workers. Given the inadequacies of current treatments, it is also my responsibility to develop clinical and basic research efforts in the substance abuse fields which are the forerunners of enhanced and improved treatments of the future.

It is a sometimes mistaken belief that the substance abuse problem is largely confined to large inner city populations and not to primarily rural states like South Carolina. This is clearly not true, as substance abuse is also the #1 health problem in South Carolina. Carefully conducted epidemiologic studies clearly indicate that at least 13-15% of the American population will become alcoholic and another 8-10% will become addicted to illegal substances, making the substance abuse disorders the most common illness confronted by the health care system. In this state, there are firm estimates of 390,000 South Carolinians who have a serious alcohol problem. Alcohol is the most widely abused substance in South Carolina. In 1980, the number of patients presenting for treatment to the county and state facilities was 28,000. By 1988, this had increased to 50,000 and is projected to be 61,000 in 1990. Cocaine is the second most commonly abused drug in South Carolina. Cocaine abuse has catastrophically increased, with an almost twenty-five fold increase since 1980. Thirty-five percent of the arrests in South Carolina are directly related to alcohol abuse and another 6% to cocaine and other illegal drugs, making 41% of all arrests in South Carolina related to substance abuse. Again, arrests related to cocaine abuse have increased dramatically with an 800% increase since 1980. This increase has been felt throughout the state, but is heaviest in Charleston and Columbia.

The most dramatic increase in use and abuse of substances is seen in our younger population, particularly individuals, under the age of 29. Recent data document that the young people in South Carolina are consuming 2-3 times the national average of alcoholic beverages. This, combined with the rapidly accelerating problems of cocaine use in the young and, in particular, the recent sad awareness of cocaine use by pregnant mothers, demand our attention.

Although South Carolina has an excellent state and community system directed by Mr. Jerry McCord, it is poorly funded, and we spend below the 50-state average per capita in expenses per client. The state and county system, SC Commission on Alcohol and Drug Abuse (SCCADA) and the Department of Mental Health system, while making valiant efforts in the war on substance abuse are deficient in many areas and lack the necessary resources to treat the monumental substance abuse problem in South Carolina. We confront this daily in our emergency rooms, hospitals, and clinics.

Response to the Problems of Drug Abuse in South Carolina

You have asked me to tell you what we need at MUSC to respond appropriately to these issues. I think the response of my department and the Medical University of South Carolina to these problems in the state can be conceptualized in several ways. First, we need to provide leadership for the mainstreaming of substance abuse treatment in the existant health care system. That is, we must bring this number one health problem into the mainstream of health care, into the training of appropriate health care professionals, and to make available the biomedical research establishment to tackle this huge problem. This mainstreaming has not yet occurred here or elsewhere.

It is a poorly appreciated fact just how far outside the traditional health care system the treatment of substance abuse really is. The most effective treatment that has evolved in the field has been Alcoholics Anonymous (AA) and its outgrowth organization, Narcotics Anonymous (NA). This treatment has made an immense difference, and at this point is the only widely available treatment for substance abuse. AA and systems based on the AA principles are now available in almost every community and provide the backbone for of the care of addictive persons across the United States. South Carolina is lucky to have a widely dispersed system, due to the hard work and vision of our legislature, and leaders in SCCADA, especially Jerry McCord. However, in South Carolina and across the nation, the treatment approaches are sadly limited in their effectiveness. It is now clear that 50-70% of patients receiving currently available treatments for substance abuse will not obtain substantial benefit. Relapse rates for substance abuse are as high as 90% in certain groups, but involve the majority of patients in all current treatment approaches.

With the majority of the treatments for substance abuse having grown up outside the medical and biomedical research environments, a remarkable situation has occurred where research-oriented professionals have not devoted attention to the substance abuse field in sufficient numbers or quality. This deficiency has become the primary focus of the Federal strategy on the treatment side of the War on Drugs, i.e. to develop research capabilities to study new treatment programs which are developed as part of that program. It has been recently widely quoted that there are "no validated treatments" for any substance abuse treatment. In other words, the majority of the treatments used in South Carolina and across the country have not been studied in any routine way to determine if they are effective over the long-term or which treatments are more effective than others in a particular situation or with a specific group. This has meant denial of access not only to routine research advances but has placed the substance abuse field outside of the remarkable revolution in neuroscience and psychiatry. The most rapidly evolving field in science is in the neurosciences studying the brain. It is the clear consensus in the field that the major advances in future treatments of the substance abuse field will have a primarily biological and brain focus. We need to bring the substance abuse field into the mainstream of science, neuroscience and psychiatry.

It is clear that the substance abuse field has, for various reasons, grown up outside of the field of psychiatry. It is probably fair to say that psychiatry has failed to devote anything resembling adequate attention to the substance abuse field but is now beginning to address this extraordinarily important task, bringing professionals and critical knowledge essential to the substance abuse field. It is now clear that 1/3-2/3 of substance abuse patients have major psychiatric problems separate from the substance abuse problems and in many cases contributing to or even causing their substance abuse problem. These include the anxiety disorders, depression and mania, psychotic disorders and others, all conditions for which effective psychiatric treatments have evolved during recent years. For theoretical reasons and because they grew up outside the medical system, the AA-based treatments generally deny the importance of these psychiatric disorders in patients who abuse drugs. This raises major problems in the care of these patients with both disorders. For instance, on a daily basis we have to deal with manic-depressive patients who have been stabilized for the first time on lithium, but who are then told by the AA team to stop their lithium.

At MUSC, we are currently trying to develop services to respond to these issues, especially by designing and implementing effective treatments which are rigorously studied. We are also developing programs to train future professionals in this area and basic and clinical research programs. These are all conceived with a scientific focus, and make use of the remarkable resources of modern biomedicine and psychiatry. We are attempting to expose talented trainees from psychiatry, family medicine, internal medicine, nursing, psychology, and social work to the proper perspective on this number one health problem.

What Do We Need To Respond To These Issues?

First, let me provide an overview of what we feel we need and then describe in more detail the various programs we are currently trying to develop at MUSC and what is necessary to achieve success in these arenas.

We need to develop treatment programs that will complement existing programs in the state and will fill critical gaps in the existing treatment system. Perhaps an excellent example of this is the programs we are currently developing especially for alcoholics and cocaine abusers who have a clear and preexisting psychiatric problem. This would include the patient with panic disorder or agoraphobia who abuses alcohol or cocaine, or the patient with recurrent and severe depression who has begun to abuse illegal substances. These treatment programs need to be developed in the context where current and future treatments are studied in a scientifically rigorous environment to demonstrate their efficacy and subsequently their cost effectiveness. These clinical programs will be used to train a new generation of motivated, well-educated, and scientifically-oriented professionals. Alongside these clinical programs, we will need to develop clinical and basic research efforts which will help form the basis for the treatments of the future. This strategy of integrating clinical programs with basic science laboratories and clinical research sciences is the time-honored strategy employed by the NIMH in which these three groups work along side in the same physical environment. This approach has led to remarkable advances in the understanding of multiple illnesses, and the rapid transfer of ideas between basic researchers to clinical researchers to clinicians and vice versa. Our work at MUSC with Dr. Randy Sallee with the cocaine receptor serves as a good example. We are close to isolating the site or receptor in the brain where cocaine binds and presumably leads to its pleasurable and therefore addictive activity. If we isolate the cocaine receptor, we should be able to very rapidly develop an antagonist for this receptor. These advances in the basic science laboratory could then rapidly be translated to clinical studies in cocaine abusers in which an antagonist would be administered and then the effect of subsequently ingested cocaine would be blocked. This would very rapidly lead to much more effective treatments in which the patients would (or even ordered by the court) receive a cocaine antagonist. Its use would be monitored, and presumably this would lead to marked decrease in the use of cocaine.

A setting combining clinical programs and clinical and basic research available to us at MUSC, would place us in an excellent position to apply for considerable external funding. This type funding is available from the NIMH and NSF for the basic and clinical research studies and the pharmaceutical industry for the development of new medications.

Over the past 6-7 years at MUSC, we have aggressively attempted to develop the resources to respond effectively to these problems. We have had some initial successes in at least several areas. We have increased the training of the psychiatrists and medical students in the substance abuse field including the first fellowships for fully trained psychiatrists and psychologists in substance abuse. We have accomplished this with a combination of federal, state and SCCADA funding. We have also developed a growing cadre of clinical and basic science researchers to allow us to begin studies across the broad range of issues. However, most of the researchers have other duties and cannot devote full time effort to these activities. We have been less successful in developing new clinical programs, although we have had initial successes at the VA Hospital especially.

What we need to do now is 1) to establish a comprehensive clinical site to develop, study and validate new treatments. These programs would complement existing SCCADA, Department of Mental Health, and private facilities in the Charleston area. We propose to develop a system which is complementary to those programs by filling current gaps in the field, for example developing programs for patients who have co-existing psychiatric and substance abuse problems or a treatment setting for patients who have failed in traditional treatments. This site would also allow us to train large numbers of professionals and to apply for the large increase in federal funds earmarked for this type activity. As mentioned previously, the primary federal emphasis on the treatment end of the War on Drugs has been allotted to the ADAMHA agencies (NIMH, NIDA, NIAAA). Dr. Fred Goodwin, the ADAMHA Director, has directed that these funds allocated for the development of new treatments, or expansion of existing treatments all have a research focus to study their effectiveness. This federal strategy will allow for the first time a broad effort to study existing treatments in the substance abuse fields and to develop and validate effective future treatments. Dr. Goodwin has visited us four times in the last 18 months and is very interested in helping catalyze an effective effort here at MUSC of the sort I have described. It is his belief, as it is mine, that we are close to being able to make major contributions in the clinical care of substance abusing patients, the training of a large number of professionals in this area, and in in clinical and basic research. The resources described below, I firmly believe, would allow us to develop the ability to succeed at the level of success implied by my previous comments and to develop funding sources which would make these efforts self-supporting in 2-3 years.

I am proposing that "what we need" is to pull together the clinicians, basic researchers and clinical researchers which we already have and recruit a cadre of new people and to organize them in a newly constituted Center for Research in Substance Abuse. With our ties with the National Institute of Mental Health, National Institute of Drug Abuse, National Institute of Alcohol Abuse, the South Carolina Alcohol and Drug Abuse Commission, and the South Carolina Department of Mental Health, we are close to the point where we could make critical contributions to this effort in South Carolina. I will describe below what I feel are the resources needed and how they would be applied to this important task.

Proposed MUSC Center for Substance Abuse Research

Introduction

Substance abuse in developed nations has reached epidemic proportions. In the United States it is estimated that over a lifetime at least 13-15% of Americans will become alcoholics and somewhere between 8-10% will become addicted to illicit substances. Although traditional psychosocial treatments offer much to some substance abusers depending upon the duration of their disorder and certain socioeconomic factors, conservative estimates are that from 50-70% of patients availing themselves of such therapies do not receive long lasting benefit. The task of clinical and basic science research will be to develop new biomedical strategies that will apply to various subpopulations of substance abusers who are currently poorly served by traditional treatments such as psychosocial, behavioral, and self-help methods.

The major developing and ongoing themes for the Center for Substance Abuse Research will be the performance of studies that will ultimately lead to improvements in biomedical care for victims of substance abuse disorders. This proposal delineates a number of traditional and nontraditional treatment areas but in all cases each component program will support the major biomedical thrust of research. It is our conviction that major progress in the field of the substance abuse disorders is dependent on "mainstreaming" the substance abuse field into medicine, psychiatry, and the biomedical/neuroscience research arenas. We also believe that adequate allocation of resources to this effort will result in effective biologically based treatments for the substance abuse disorders. Most of the substances of abuse have receptors or sites of interaction in the brain which mediate their pleasurable effects, the craving mechanisms, and secondary medical and psychiatric complications. Once these interactions are understood, effective biological treatments can be developed relatively quickly.

Program Elements

The Center for Substance Abuse Research would incorporate multiple modular program elements which will interact with each other in the quest to develop more effective substance abuse treatments. Figure 1 delineates the clinical modules and Figure 2 the basic and clinical research modules. Each component is described briefly below, and then individually in more depth in the subsequent sections.

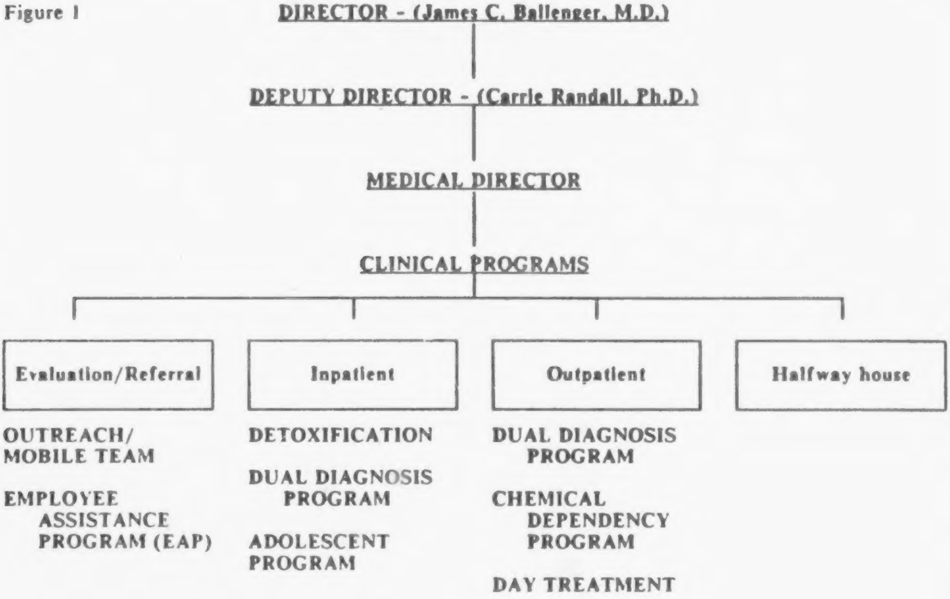
I. Clinical Programs (see Figure 1)

A. Evaluation/Referral/Triage Program

The evaluation/referral program of the Center will be the initial contact point for patients, families, and subjects who are to participate in one or more of the programs. Initial computerized clinical and research assessments will be made in this setting. Such assessments may be based on self-reports, clinician interviews, psychometric testing, electrophysiologic measures, and clinical and research chemistries. It is strongly recommended that this section also serve as the Employee Assistance Program (EAP) for the Medical University and possibly other affiliated state and county institutions. Employee Assistance Programs at the Medical University could stand to be more strongly supported by the Department of Psychiatry and Behavioral Sciences and furthermore could provide a valuable source of patients and subjects for the clinical and basic science programs. It is also recommended that this unit develop a mobile intervention team that would be available to other institutions, professionals and individuals and families within the community who are directly involved with a chemically-dependent individual who is impacting upon their social setting. This service would be provided at nominal charge and would be a major source of referrals to the Center.

The evaluation section would work closely with all clinical and basic science research projects. Upon completion of the evaluation, individuals enrolling in the Center would then be directed to one or more of the other modules listed below and in addition might well be enrolled in one or more clinical or basic science research protocols.

Figure 1


DIRECTOR - (James C. Ballenger, M.D.)
DEPUTY DIRECTOR - (Carrie Randall, Ph.D.)
MEDICAL DIRECTOR
CLINICAL PROGRAMS
Evaluation/Referral
Inpatient
Outpatient
Halfway house
OUTREACH/ MOBILE TEAM
EMPLOYEE ASSISTANCE PROGRAM (EAP)
DETOXIFICATION
DUAL DIAGNOSIS PROGRAM
ADOLESCENT PROGRAM
DUAL DIAGNOSIS PROGRAM
CHEMICAL DEPENDENCY PROGRAM
DAY TREATMENT

B. Outpatient Treatment Programs

1. Outpatient Dual Diagnosis Module

The Outpatient Dual Diagnosis Module would be established to provide psychopharmacologic and psychosocial treatment of patients suffering from both chemical dependency and psychiatric disorders. Pharmacologic therapy would be aimed at ameliorating the symptoms of the psychiatric disorders and to test pharmacologic agents that show promise in the detoxification or rehabilitation of the substance abuse disorder patient. Some patients would be enrolled in controlled research trials through this program and other patients would be in preliminary open label, empirical trials to determine the most effective therapies using traditional psychopharmacologic agents.

2. Outpatient Chemical Dependency Program

The Outpatient Chemical Dependency Module would be another new program for patients with primary chemical dependency (i.e., no concomitant psychiatric disorder) who are undergoing detoxification or rehabilitation of their chemical dependency. This program would offer a number of counseling and psychotherapeutic treatments for individuals entering the Center. Group therapy, individual therapy for youth and adult, and couples/family therapy would be provided. This module would probably be held on two afternoons or evenings per week to provide services to the widest possible group of outpatients. This program will offer (and study) treatment of early substance abuse problems. The program will also have a component to offer research innovative programs, often pharmacotherapy, to patients with a history of prior treatment failure in traditional psychosocial and self-help group treatments. The primary purpose of this program would be to engage in open label, empirical trials of agents that have promise in the treatment of the substance abuse disorders. This clinical program could rapidly treat large numbers of substance abusers sequentially with agents that hold clinical promise. All clinical work would be conducted with research standards so that changes in affect, behavior and cognitions could be systematically measured. If promising results were demonstrated with any one agent, then special research protocols would be developed and studied in controlled, rigorous clinical trials.

3. Day Treatment Program

The Day Treatment Program would generally begin mid-day to midafternoon and proceed throughout the mid-evening for individuals not requiring the structure and extended medical services of hospital care. Such patients, however, would require greater structure than individuals requiring 1-2 hours per week of outpatient services alone. It is estimated that individuals in this program will receive 4-8 hours per day of intensive treatment in psychosocial programs, self-help programs, and pharmacologic management.

C. Research Halfway House

The Research Halfway House will be developed to support the efforts of the intensive day treatment program as well as some of the modules for outpatient treatment such as the Dual Diagnosis or Outpatient Chemical Dependency Psychopharmacology Modules. From first observation, it might seem that a Research Halfway House would be peripheral to the needs of a research center and a large expenditure of resources that might be placed elsewhere. However, it is estimated that up to 1/3 of individuals being treated in the Center for Substance Abuse Research will lack third party payment to the extent of not being able to afford outpatient services or extended inpatient services, and furthermore, up to 10% may be homeless. The Research Halfway House will operate to support extended patient stays for patients who are participating in research protocols. It would also support the development of research protocols to determine which patients should participate in a halfway house following discharge from inpatient treatment or which patients should require halfway houses while participating in an intensive day program. Although this method of treatment is utilized widely in many areas, there are almost no studies of its utility and cost-effectiveness.

D. Inpatient Treatment Programs

The Inpatient Treatment Program will provide detoxification services as well as inpatient initial stabilization and rehabilitation services for a population that is either too medically unstable or too psychiatrically unstable to tolerate either outpatient treatment or intensive day treatment. It is anticipated that many of the services that will be provided through the day treatment program can also be provided for inpatients. It will be possible for the staff of both programs to overlap. It is also recommended that the Inpatient Treatment Program also have some time, generally in the early morning hours, devoted to noncognitive forms of therapy such as OT and RT. More intensive medical and psychiatric treatment will be provided with this group of patients.

E. Program Development

It is anticipated that the Center for Substance Abuse Research would start gradually with probably three modules consisting of an Evaluation Module, an Outpatient Psychosocial Treatment Research Module, and an Outpatient Psychopharmacology Module that would initially treat both pure chemical dependent patients and dual diagnosis patients. Inpatient detoxification services could also be offered early on in program development. Other modular development would proceed as funding and staff recruitment become available. Existing space within the Department of Psychiatry and Institute of Psychiatry could probably be used to implement these initial modules. Following this, a decision to either expand the Institute or to lease existing space that could be renovated would have to be made. If funds are available, the ideal plan would be to enlarge the Institute with an additional floor or two to provide space for the Center for Substance Abuse.

F. Budget for Clinical Programs

Table 1 delineates the funds needed for development of physical spaces for the Center for Substance Abuse Research. Table 2 has the budget for the completely, fully operational clinical Center for Substance Abuse Research which could conceivably be operative by Years 4-5 of a five year plan. Table 2 delineates salaries for positions for Years 4 and 5. Table 3 indicates the halfway house costs and supplies. Table 4 represents the totals from all sources with an overall budget of approximately $815,940/year for the clinical programs. It should be noted that the budget does not cover the cost of inpatient care which probably should be figured at $350-450 per day for 8-10 inpatients per year, nor does it cover outpatient care.

Table 1

Space:	
1. Add space for Positron Emission Tomography (PET) clinical and research programs and other outpatient clinical research programs.	$1,100,000
2. Add a floor on the existing MUSC Institute of Psychiatry to house the inpatient clinical and research programs.	$3,000,000
3. Add one floor of basic research laboratories on Institute of Psychiatry building	$1.400.000
Total building costs	$5,5000.000

Table 2

Budget for Clinical Programs

Salaries per year			
Medical Director	120,000		120,000
Outpatient Psychiatric Director	80,000		80,000
Inpatient Psychiatric Director	80,000		80,000
Business Manager	34,000		34,000
Halfway House Manager	25,000		25,000
Assistant Halfway House Manager	18,000		18,000
Social Workers, MSW (2)	34,000		68,000
Nurses (2)	27,000		54,000
Alcohol rehab counselors (2)	22,000		44,000
OT	27,000		27,000
RT	23,000		23,000
Receptionist	15,000		15,000
Secretaries (2)	17,000		$ 34,000 $622,000
		Fringe 17% +	$105,740
		Table I	$727,740 TOTAL

Table 3

Halfway House

$1,000 monthly lease
$4,650 monthly food (15 residents)
$ 700 monthly utility
$6,350/month x 12 = $76,200 year

Supplies

$12,000 year

Table 4

Physical Spaces		$5,500,000
Yearly Operational Costs		
Salaries	$ 727,740	
Supplies	$ 12,000	
Halfway House	$ 76,200	

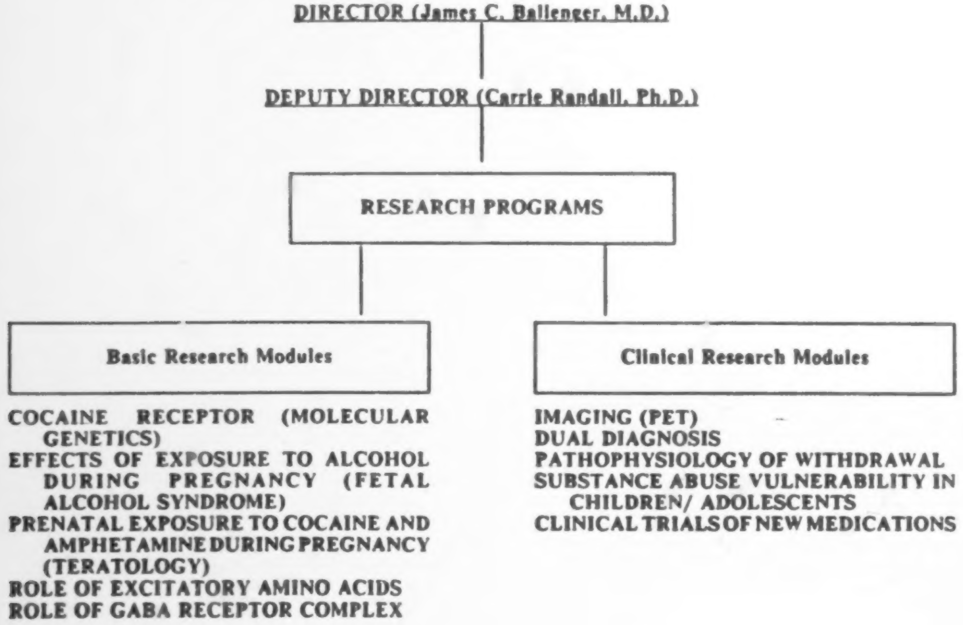
Total per year $ 815,940/year

Plus (above budgets do not cover the following)

A. $124,000 one time furnishing costs
B. ? Outpatient and Inpatient (350-450/d/patient) clinical costs, although inpatient and outpatient activities would generate revenues to significantly offset these costs

II. Research Program (see Figure 2)

The programs for the proposed Center for Substance Abuse Research would involve both clinical and basic science research. Each of the clinical programs developed (described above) would not only provide treatment, but each treatment would be studied as research projects. The basic science section is primarily laboratory-based and would pursue the most promising leads in understanding the basic physiology primarily of cocaine and alcohol addiction and their complications. These are overviewed in Figure 2. and will be briefly reviewed below. They are described in detail in the subsequent sections.



DIRECTOR (James C. Ballenger, M.D.)

DEPUTY DIRECTOR (Carrie Randall, Ph.D.)

RESEARCH PROGRAMS

Basic Research Modules

COCAINE RECEPTOR (MOLECULAR GENETICS)
EFFECTS OF EXPOSURE TO ALCOHOL DURING PREGNANCY (FETAL ALCOHOL SYNDROME)
PRENATAL EXPOSURE TO COCAINE AND AMPHETAMINE DURING PREGNANCY (TERATOLOGY)
ROLE OF EXCITATORY AMINO ACIDS
ROLE OF GABA RECEPTOR COMPLEX

Clinical Research Modules

IMAGING (PET)
DUAL DIAGNOSIS
PATHOPHYSIOLOGY OF WITHDRAWAL
SUBSTANCE ABUSE VULNERABILITY IN CHILDREN/ ADOLESCENTS
CLINICAL TRIALS OF NEW MEDICATIONS

Clinical Research Modules

A. Positron Emission Tomography (PET) studies in alcoholism and cocaine abuse.

Certainly the most exciting advance in our ability to understand how the brain works normally and in various illness states like the substance abuse disorders has been the recent development of the PET scan technology. This technique allows us to see which parts of the brain are active, overactive, or underactive in various pathological conditions. It also allows us to pinpoint specific neurotransmitters, receptors, and sites of activity for many drugs in the brain in a safe and noninvasive manner. The recent decision at MUSC to aggressively pursue a PET scanner and to place it physically in the Institute of Psychiatry complex if funds are available, provides a remarkable boost to the clinical research activities in the proposed Center for Substance Abuse Research.

This revolutionary technological advance would allow us to explore specific receptors related to the addictive process with alcoholism and cocaine as well as pathological alterations of these brain sites. It would also allow us to study in the living brain the medicines which are specifically designed to block these receptors. This technique allows us, for the first time, to explore avenues of research and theories which have evolved from other techniques and holds unlimited promise in the substance abuse field.

B. Dual Diagnosis Clinical Research Program

This program would attempt to understand more fully patients with substance abuse problems and concomitant psychiatric problems (e.g. anxiety, depression, psychosisi, etc.) more effective treatments for this group of patients. These patients usually respond poorly in traditional substance abuse programs and appear to need specifically designed treatments. This program would make a major contribution to this new field by studying their clinical characteristics, the pathophysiology leading to these dual problems, and t develop new pharmacological and non-pharmacological treatments.

C. Pathophysiology of Withdrawal from Alcohol and Other Addictive Drugs

The well recognized serious complications of withdrawal from addictive drugs is now being studied at a brain level, not only because of the medical complications but because it is felt to be involved in the basic process of addiction itself. Again, the basic strategy is to attempt to understand what is going on in the brain during withdrawal using various biochemical, electrophysiological, and the exciting PET scan methodologies such that effective treatments can be developed.

D. Substance Abuse Vulnerability and Treatment in Children/Adolescents

Distressingly little attention has been paid to the substance abuse problems in children, although this has been identified as an area of high interest by the research institutes in Washington. We propose a series of clinical studies described below of the basic pathophysiology and treatment of these disorders in children.

E. We also include a section below which briefly describes areas of future research we would pursue were the resources of the proposed Center available to us. These are models of considerable promise based upon previous work at MUSC and elsewhere. They are each described in more detail as appropriate.

Basic Research Modules

A. Cocaine-Receptor Research

The recent progress made in the attempt to isolate the receptor in the brain for cocaine parallels the excitement of the PET technology. Were we able to isolate the cocaine receptor, an antagonist could be designed which would nullify cocaine's pleasurable and therefore addictive properties as described in the first Basic Science Module. This research is extremely complicated, sophisticated and expensive; however, its promise is obvious and its importance cannot be overemphasized.

B. Exposure to Alcohol During Pregnancy: Fetal Alcohol Syndrome

Understanding the effects of alcohol on the developing fetus is of obvious and critical importance since alcohol is the most widely abused drug and is frequently abused by women in their childbearing years. The work of Dr. Carrie Randall here at MUSC has been the primary work in this area in describing the complications of what is now termed the Fetal Alcohol Syndrome. Work in her laboratory is now proceeding to describe the effect of prenatal alcohol exposure on the adult. Recent work has centered on potential efforts to block the development of this irreversible syndrome.

C. Exposure to Cocaine and Amphetamines During Pregnancy

Like exposure to alcohol during pregnancy, exposure to cocaine and amphetamine can have devastating effects. Recent evidence suggests that use of cocaine and amphetamines, particularly the methamphetamine compounds ("ice") by pregnant women has reached epidemic proportions. This module would extend our ongoing efforts to study the short-term effects on the fetus using the rodent model and extend these into the adulthood of these animals. Early evidence suggests that exposure during pregnancy has permanent and critical effects throughout the lifetime of the exposed organism. These effects may be critical in the subsequent psychiatric and even addictive problems of humans exposed to these drugs of abuse during fetal life.

D. Role of Excitatory Amino Acids

This module includes alcohol and cocaine but also extends to attempt to understand the action of phencyclidine (PCP), one of the most destructive of the drugs of abuse. These proposals would extend recent research of the NMDA receptor in alterations of memory, seizure threshold, and withdrawal of PCP.

E. Role of the GABA Receptor Complex

One of the most important recent advances has been to identify that alcohol appears to interact in a specific place in the brain in addition to its widespread effects. This GABA receptor complex can be studied with current methodology in the laboratory as well as with the PET scan technology. It is perhaps this field which is best developed in the alcohol area in the understanding of how alcohol and other drugs of abuse interact with the brain so that drugs which block these effects can be developed. For instance, it has been demonstrated that the medication flumazenil is capable of blocking or antagonizing this GABA receptor. When present, no other drugs can interact with this receptor, thus nullifying their action in a manner similar to what we hope to be able to do with a cocaine receptor.

IV. Budgetary Considerations

The budgets for this section are individually described for each clinical research and basic research module. Each of these budgets are broken down for yearly costs and are generally described for a 3-5 year effort. Each program is quite expensive, primarily due to the sophisticated equipment required. We are including equipment costs in these budgets because this type of basic equipment is extremely difficult to obtain in NIH or National Science Foundation (NSF) grants.

It should be emphasized that each of the groups described in this application will apply for federal, NSF, and pharmaceutical research support, and it is anticipated that each would be completely self-supporting in 2-3 years. Therefore, it is difficult to provide exact budgets for each of these efforts because they are dependent upon their success in obtaining external funding. The funding requests in this proposal would be required to establish these groups by providing the space and equipment which would enable them to then apply for external funding. It is not possible to obtain external funding before laboratory space and most of the "start-up" equipment are acquired.

Summary

We are therefore proposing that the answer to the question of "what we need" at MUSC is a Center for Substance Abuse Research. Such a Center would allow the development of multiple new treatments for the various substance abuse disorders for both inpatient and outpatient populations. However, the overall strategy would be to design and implement programs where they currently do not exist and for each program to be oriented from its inception to the development of new treatments in a rigorous, scientific environment. It is this element that is missing in much of the substance abuse field.

Such a proposed Center would also have basic scientists interacting with the clinicians and clinical researchers to pursue existing and future leads in the laboratory. This close interaction holds the greatest promise for rapid progress and transfer of new knowledge to the clinical arena.

Although the funding to build and provide operational funds for this proposed Center is considerable, it is actually this level of funding which is required for this critical effort. However, the economy of such an effort is apparent. Although the establishment of such a Center would be in the $10-12 million range before it became self-supporting, this is actually quite a small amount compared to the tremendous expenditures in law enforcement and treatment facilities as well as the incalculable losses to individuals who abuse these substances and their families and the lost productivity to our society.

Clinical Research

Module 1: **Positron Emission Tomography (PET) Studies**

Personnel: **C. Kellner, M.D., B. Adinoff, M.D., K. Spicer, M.D.**

Position emission tomography (PET) is a technique that enables the physician to safely and accurately measure brain function in a conscious patient. Unlike other methods exploring brain activity or structure such as electroencephalography (EEG), computerized axial tomography (CAT), or cerebrospinal fluid studies, PET technology provides direct access to the local biochemistry of the living human brain. Studies exploring such areas as glucose utilization (how much energy various areas of the brain use) and receptor concentration (the number of nerve cell receptors that are available to respond to nervous system chemical transmitters) have been obtained by PET in both neurologic and psychiatric illnesses.

Alterations in cerebral structure-function relationships in substance abusers have previously been explored with PET scan technology. Glucose utilization has been examined in alcoholics with and without alcohol-associated brain damage and in cocaine addicts under the influence of cocaine. The effects of various other drugs, such as benzodiazepines (tranquilizers), on cerebral metabolism have also been described. Described below are some of the studies the Department of Psychiatry and Behavioral Sciences would initiate if PET technology were available. As drugs of abuse appear to exert their influence on the brain through an interaction at various neurotransmitter receptor sites, these protocols would investigate alterations in the receptors of substance abusers and their children.

1) Alcoholism and the benzodiazepine receptor: Alcohol and the benzodiazepines have several similar clinical and biochemical characteristics. Although there is not a specific receptor site for alcohol, it appears that alcohol exerts at least part of its effect through an interaction at the benzodiazepine receptor. Previous studies have suggested that alcoholics and their children may demonstrate an altered responsiveness to the effect of benzodiazepines compared to controls. The utility of using the benzodiazepine antagonist flumazenil to study benzodiazepine receptor characteristics with PET has been reported. This series of studies would investigate alterations in the benzodiazepine receptor in both alcoholics and the sons of alcoholics (who are at high risk for the development of alcoholism).

2) Cocaine addiction and the dopamine receptor: Cocaine is generally believed to exert its rewarding effects through the dopaminergic system. Various compounds have been utilized to describe dopamine receptors with PET scanning techniques. This study would explore alterations in dopamine receptors in cocaine addicts. As the appropriate tools (ligands) become available, the following studies can be initiated:

3) Cocaine addiction and the "cocaine receptor": Dr. Randy Sallee has been active in characterizing the receptor where cocaine attaches and is investigating compounds that specifically attach to this receptor. As these compounds become available, a study in addicts in which the cocaine receptor is carefully characterized by PET would allow for the design and testing of medications that may block the effects of cocaine at this receptor.

4) Alcoholism and glucocorticoid receptor changes: Significant brain damage due to alcohol is well known, although what produces this damage is not clear. It has been suggested that high levels of glucocorticoids (a steroid) that are produced during alcohol abuse or withdrawal may result in changes in brain receptors. As glucocorticoid receptor ligands become available for use in PET studies, we will explore the changes in glucocorticoid receptors in alcoholics with and without brain damage.

5) Alcoholism and the alcohol "antagonist" (RO15-4513): RO15-4513 blocks several of the effects of alcohol, apparently at a site close to the benzodiazepine receptor. As tools become available that allow the characterization of this receptor site in PET, we will explore alterations in this receptor site in alcoholics and their children.

Budget: We are asking only that space for the PET machine, cyclotron, and nuclear medicine laboratories be provided by this proposal. This could be built at the Center for $300,000-400,000. We propose to house this program with the outpatient clinical and clinical research programs and that entire building would be in the range of $1,100,000.

Module 2: **The Dual Diagnosis Program**

Personnel: **K. Brady, M.D., Ph.D., Director**

Study of the treatment of substance abusing patients who also have psychiatric disorders (e.g., anxiety disorders, depression, etc.).

Introduction: It is now clear that a substantial proportion of substance abusing patients also have a psychiatric disorder which either developed first and may have contributed to the substance abuse problem or developed subsequently and contributes to poor response to treatment. Also, numerous studies indicate a high prevalence of drug and alcohol abuse among people with primary psychiatric disorders. Psychiatric patients are clearly at risk for substance abuse, and substance abuse can precipitate or exacerbate psychiatric syndromes, increasing the utilization of health care resources. In many settings, 30-50% of psychiatric inpatients meet criteria for a substance abuse disorder. Despite the prevalence and impact of such co-morbidity, this patient population remains underdiagnosed and inadequately treated. Few programs integrate treatment of substance abuse disorders by those experienced both in the treatment of chemical dependency and psychiatric disorders. More often such patients are shunted back and forth between substance abuse and mental health facilities without adequate evaluation of the complexities involved or integration of treatment modalities.

The proposed project, with both inpatient and outpatient components, is designed to expand and improve treatment for this very difficult and poorly served patient population. The program will integrate state-of-the-art psychiatric and medical evaluation and care with elements of the 12-step recovery model developed by AA. Inpatient beds and associated outpatient clinic space will be used for this purpose. At MUSC, there presently exists a strong commitment to clinical service and research by capable faculty members with established credentials in both substance abuse and psychiatric medicine. Several funded research projects in related areas of substance abuse and co-morbidity are ongoing. In addition, there is a strong liaison with several members of the internal medicine and neurology departments who serve as regular consultants to the Psychiatric Institute.

The program would specialize in the treatment of patients with psychiatric disorders co-existing with substance abuse disorders. The treatment program would involve careful evaluation, judicious use of pharmacologic agents and psychosocial approaches specifically designed to prepare and integrate these patients into the AA/NA treatment modalities. A focus would be provided on relapse prevention, using behavior modification, social skills training techniques and cognitive/behavioral therapies and appropriate medications. Separate tracks involving different treatment strategies and group therapies would be developed to focus on the thought-disordered, generally schizophrenic, lower functioning group and on the higher functioning patient with affective or anxiety disorders (Appendix A).

Clinical Services: The first step will be the implementation of an evaluative and treatment program for patients with psychiatric disorders co-existing with substance abuse disorders within the Institute of Psychiatry. This program is described in detail in the following pages. The program will have both inpatient and outpatient components. Because of our strong faculty trained in psychiatric medicine as well as the treatment of substance abuse disorders, the Institute of Psychiatry is uniquely qualified to develop treatment in this area and would provide a service not offered elsewhere in South Carolina. The next step would be the development of full inpatient resources coupled with a day program for the treatment of the general substance abusing patient.

Research Development: The Medical University already has a strong research effort in the basic sciences as well as clinical areas of substance abuse. Much of the clinical research effort to date has taken place at the Veterans Administration Medical Center. The development of a treatment program at the Institute of Psychiatry would provide a critically important additional clinical base for research purposes which has a broader socioeconomic and sex distribution, more representative of the general population of South Carolina. Work done with this population can therefore be more varied and generalizable. Some of the specific clinical studies proposed are described elsewhere. The establishment of a substance abuse program at the Institute of Psychiatry would provide a forum for collaboration between the excellent basic scientists and clinicians in the Department of Psychiatry at MUSC.

Educational Component: The Department of Psychiatry at MUSC is involved in the training of medical students, residents in psychiatry, psychology and social work interns as well as in nursing education. Additionally, it is a site for fellowship training in substance abuse as well as postgraduate nursing training. The substance abuse program could coordinate and develop training for these various disciplines within the context of the clinical and research programs.

The outpatient component would consist of day and evening treatment programs utilizing relapse prevention techniques, family therapy, cognitive/behavioral techniques and pharmacotherapy. This program would serve as a model in the Southeastern United States and as such would benefit not only the Charleston community but would become a referral site for the state and region. Additionally, this program would serve as a unique training site for medical students, residents and other health care professionals working in the area of addictions.

The general outline of the program is shown in Appendix B. Substance abuse support staff will screen potential applicants and patients by phone using a brief checklist questionnaire. This will be reviewed by the program director and referred to one of the substance abuse faculty members who will evaluate the patient and/or family and make a determination about the appropriate treatment modality. The assessing clinician will prioritize patient hospitalization needs based on requirement for detoxification, medical instability, acuteness of the psychiatric disorder and family/social crises. Those patients who do not require inpatient services, but who are appropriate for the treatment program will be referred to the intensive outpatient program and/or screened for one of several outpatient substance abuse treatment studies. The program will provide consultative services to other treatment teams at the Institute of Psychiatry. If a significant substance abuse problem is detected in a non-substance abuse treatment team patient, the attending physician would have the option of transferring the patient to the substance abuse treatment team, partially engaging in the dual diagnosis inpatient program, or making an outpatient referral at the end of the psychiatric treatment.

An effort of this type would expand and improve the availability and range of needed services to substance abusing psychiatric patients as well as provide a base from which to proceed in developing research initiatives investigating diagnostic difficulties at the interface of substance abuse and psychiatric disorders, the biological underpinnings of these disorders and the effectiveness of various psychosocial and pharmacological treatment approaches. Our faculty have already demonstrated considerable expertise in the area of research design and treatment outcome measures as well as having a strong contingent of basic science researchers in the area of substance abuse with which to collaborate. Some of the research questions to be addressed follow.

1. How prevalent is substance abuse in mainstream psychiatric patients, what tools are most appropriate for the detection of substance abuse in these patients and how does it the substance abuse effect the course of psychiatric illness?

This question has been addressed in Veterans Administration Medical Centers and public facilities but has not been posed in the broader context of private treatment facilities using state of the art evaluative measures. The impact of co-morbidity in this different socioeconomic and diagnostic population as well as information concerning diagnostic and evaluative methods would be of great importance.

2. Are self-help (alcoholics anonymous/narcotics anonymous) approaches to the treatment of substance abuse useful in the dually-diagnosed patient (i.e., both a substance abuse problem and a psychiatric disorder)?

This question has not been addressed in any systematic fashion. Clinical lore indicates that dually diagnosed patients do not do well in AA/NA treatment modalities. This program could be developed to answer this question by making a concerted effort to integrate patients into the 12 step model and evaluating the outcome of this effort.

3. Are there pharmacologic approaches that may be useful in this patient population?

Our faculty already has a track record in research of this nature. We currently have several ongoing studies: (1) the use of buspirone in anxious alcoholics and (2) use of imipramine in alcoholics with pre-existent panic disorder. One proposed study would be the use of amantadine, a dopamine agonist which has been shown to relieve cocaine craving as well as extrapyramidal side effects of neuroleptic medications, in substance abusing schizophrenic patients on neuroleptic medications.

4. What are the biological underpinnings of the interface between psychiatric disorders and substance abuse?

Substances of abuse effect neurotransmitter systems in the brain thought to be involved in psychiatric disorders. For example, cocaine effects the dopaminergic system which is believed to be involved in both psychotic (schizophrenic) processes as well as affective disorders. One area of research would pursue the area of dopamine function in patients who abuse cocaine and other stimulants and who have affective and psychotic disorders

In summary, the proposed treatment plan would serve all facets of the substance abuse program. It would provide (1) much needed expert clinical services to an important, yet underserved population of substance abusers; (2) provide a referral site for the substance abuse commissions (SCCADA) and Department of Mental Health within the state for the dually diagnosed patient, a patient population often difficult to diagnose and treat in settings designed for substance abuse patients without psychiatric problems; (3) identify a clinical base for research purposes; and (4) become a training site for mental health care professionals in the management of substance abuse disorders.

Budget

Staff

Psychiatrist - Inpatient, Consultative Service	75,000
½ Psychiatrist - Outpatient, Screening	35,000
Clinical Psychologist - Program Director	50,000
Clinical Nurse Specialist	40,000
2 Social Workers (Inpatient and Outpatient)	70,000
2 Rehabilitative Technicians	48,000
Administrative Assistant	22,000
Research Technician	18,000
Yearly Total	$358,000

Equipment

Testing Equipment	2,000
Computer Equipment	5,000
Educational Tapes and Audiovisual Equipment	3,000
Xeroxing	1,000
	$11,000

Other

Per Diems Hospital Stay
Laboratory Services
Inpatient Nursing
Recreational Therapy
Occupational Therapy

APPENDIX A

TRACK ONE

Pharmacotherapy
Psychoeducational Group
Substance Abuse Education Group
Family Group
AA Preparedness Group
Medication Education Group
AA/NA or Double Trouble Meetings
Individual, Marital and Family Therapy as needed
Job Acquisition/Retention Group

TRACK TWO

Pharmacotherapy
Relapse Prevention Group
Substance Abuse Education Group
Family Group
Medication Education Group
AA/NA or Double Trouble Groups
Individual, Marital and Family Therapy as needed
Job Acquisition/Retention Group

Descriptions of groups designed specifically for dual diagnosis patients

AA Preparedness Group: This weekly one-hour group session is designed to explain the theory and practice of AA/NA organizations and to instruct the patients in how to best integrate themselves into these groups. Role playing with videotape feedback will be used to help patients develop skills which will enhance their acceptance at the recovery groups. Patients will be escorted to at least one AA/NA meeting by the therapist. A debriefing session after the meeting will be held.

Cognitive-Behavioral Problem Solving Group: This weekly one-hour group will be held for higher functioning patients and is designed to help them maintain their sobriety. The general approach will involve helping patients to problem solve difficulties and to employ the varied techniques learned in the program to help them avoid release. The group will meet in the evenings to maximize patient participation.

Double Trouble Group: An AA/NA group designed specifically for patients with a substance abuse disorder coexisting with another major psychiatric diagnosis will be developed by a staff member and a recovering substance abuser who is active in AA/NA in the community. This group will meet weekly for one hour per week and will be available to both inpatients and outpatients.

Job Acquisition/Retention Group: This group will meet twice weekly and is designed for patients who are unemployed. Techniques to be used will include instruction in resume preparation, role-played interview rehearsal, video feedback, planning of interviews, contracts to make phone or interview calls, and processing of successful and unsuccessful contacts. Both inpatients and outpatients will be eligible to attend this group.

Medication Education Group for the Dually-Diagnosed: This weekly one-hour didactic session is designed to teach patients about their prescribed medications and how substances of abuse interact with their medications and their illness.

Multifamily Group: This group is designed for family members and the substance abusing patients. Some didactic information concerning the effects of substance abuse on the family will be provided. Family members will receive assistance in skills to be used in interacting with the substance abuser to decrease the likelihood of triggering relapse. Basic communication skills will be emphasized.

Relapse Prevention Group: This group is designed for higher functioning patients and will emphasize several areas.

a. Identification of warning signs of relapse both from the psychiatric disorder and alcohol/drug use. Activities will include the use of didactic materials, videotapes, roleplay, and homework assignments.

b. Management of warning signs. This activity will include attention to problem solving, roleplay, in vivo management exercises, development of an emergency plan to be used when the likelihood of relapse is high, and homework assignments.

c. Coping with and adaptation to persistent symptoms. This specific activity will involve the use of videotapes, the development of coping behaviors (problem solving, tolerance, distraction, relaxation strategies, development of social supports, self-talk, etc.), role play, contracting, and homework assignments.

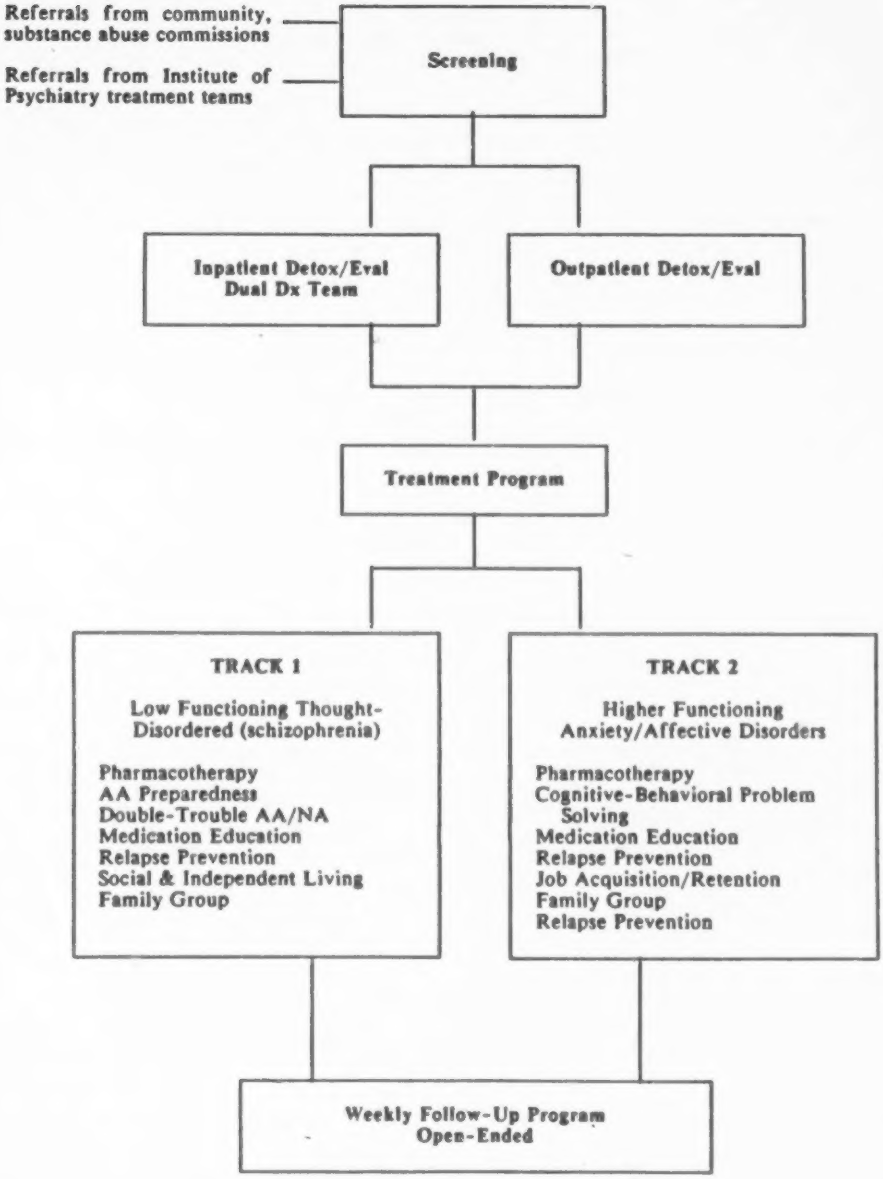
d. Avoiding and dealing with alcohol and drugs. Didactic presentations, visual aids, and role play activities will be used to educate patients about the effects of alcohol and drugs and about ways to cope with the temptation to use. Videotaped and group feedback will be used.

Social and Independent Living Group: This group is designed for thought-disordered patients. The content of the group will be based upon the work of the Brentwood VAMC and will emphasize several areas identified in the Relapse Prevention Group. The format, however, will be less confrontational and provide a heavier emphasis upon roleplay, practice, and repetition. The group will be open-ended in format and include both acutely ill inpatients as well as more intact outpatients who can serve as role models for the more dysfunctional patients. The group will meet twice a week for forty minutes per session. An inpatient and outpatient therapist will co-lead the group.

Stress Management Group: This group will meet twice a week for patient with dual diagnoses and will incorporate such techniques as relaxation and medication, problem solving, time management, exercise and general cognitive-behavioral strategies for dealing with stress.

Substance Abuse Education Group: This group is designed for all patients, will be didactic in content, and will focus on physical, psychological, social, and functional problems caused by drug and alcohol use. Videotapes, trigger tapes, and discussions will be used to facilitate interaction.

APPENDIX B


Referrals from community, substance abuse commissions
Referrals from Institute of Psychiatry treatment teams
Screening
Inpatient Detox/Eval Dual Dx Team
Outpatient Detox/Eval
Treatment Program
TRACK 1
Low Functioning Thought-Disordered (schizophrenia)
Pharmacotherapy
AA Preparedness
Double-Trouble AA/NA
Medication Education
Relapse Prevention
Social & Independent Living
Family Group
TRACK 2
Higher Functioning Anxiety/Affective Disorders
Pharmacotherapy
Cognitive-Behavioral Problem Solving
Medication Education
Relapse Prevention
Job Acquisition/Retention
Family Group
Relapse Prevention
Weekly Follow-Up Program Open-Ended

Module 3: Study of the Pathophysiology of Withdrawal from Alcohol and Other Addictive Drugs

Personnel: Bryon Adinoff, M.D., R. Malcolm, M.D., H. Becker, Ph.D.

Introduction:

The chronic use of substances of abuse produce unpleasant, and sometimes fatal, symptoms of "withdrawal." When withdrawal symptoms are experienced, the substance abuser has become "dependent" upon alcohol or drugs. Understanding the phenomena of withdrawal is essential to improving our methods of treatment of substance abuse disorders. The importance of substance abuse withdrawal is outlined below:

1. Symptoms of withdrawal are typically attenuated or eliminated by further alcohol or drug (such as cocaine or heroin) administration, thereby continuing the cycle of addiction. A substance abuser will therefore commonly continue in their addiction not to experience the "pleasurable" effects of their drugs, but to avoid the unpleasant feelings of withdrawal.

2. It appears that the feelings of withdrawal may be experienced during periods of abstinence in the substance abuser, particularly when exposed to situations previously associated with alcohol or drug use. This feeling in the recovering substance abuser may be described as a "craving." Since previous experience has taught the substance abuser that these feelings can be lessened with alcohol or drugs, a return to substance abuse frequently follows.

3. A wide array of biochemical, physiological, and psychological changes occur during the withdrawal syndrome. Most addicted individuals experience withdrawal at least daily (such as morning shakes in the alcoholic). The marked changes that occur on a repeated basis during withdrawal may eventually produce permanent brain or other organ damage.

We propose a series of studies to explore and further understand the pathophysiology and consequences of withdrawal:

1. Procaine Infusion in Cocaine Addicts, Alcoholics, and Controls:

Procaine is a local anesthetic which stimulates the limbic system, a part of the brain central to the regulation of mood. Studies indicate that the limbic system is also important in the experience of withdrawal. In this study, procaine will be administered to a group of alcoholics and cocaine addicts. Their responses will be compared to a group of healthy, non-substance abusing controls. Subjects will be evaluated during procaine infusion for mood, EEG, and neuroendocrine changes. Mood changes will be assessed for similarities to those experienced during drug administration or during withdrawal (as described by the patients). The effect of panic attacks on these changes will also be evaluated. Subsequent studies will be undertaken to explore the effects various medications (such as those that may reduce "craving") have on the experience of procaine administration. As previous studies have suggested that withdrawal may differ in children at risk for the development of substance abuse (children of substance abusers), follow-up studies will evaluate these at-risk children of substance abusers for possible differences in response to procaine.

Budget:

Quarter-time physician	$20,000
Full-time electrophysiologist	$65,000
Research Technician	$22,000
System described below would provide necessary equipment for EEG, brain mapping, and evoked potentials:	$46,000
IBM Computer (2)	$13,000
Optical disk systems	$ 8,000
EEG machine	$20,000
Software	$ 5,000
Supplies	$ 2,000

2. Hypothalamic-Pituitary-Adrenal (HPA) and Autonomic Nervous System Functioning in the Substance Abuser:

These studies will complement a series of studies we have completed or have in progress. Specific questions of interest include:

a. The onset of HPA axis and sympathetic nervous system dysfunction during withdrawal will be evaluated. Subjects will be studied immediately upon admission to the hospital, which is often shortly following the self-administration of drugs or alcohol and withdrawal is not yet evident. By studying these systems as withdrawal symptoms evolve, the progression of biochemical and physiological changes during withdrawal can be determined. Specifically, plasma cortisol and norepinephrine levels will be obtained every twenty minutes from the time of admission through the onset of withdrawal.

b. Various probes are useful in eliciting alterations in neuroendocrine functioning. We have previously demonstrated changes in HPA axis activity at one week and three weeks following the cessation of drinking as determined by corticotropin-releasing hormone (CRH) administration. We propose to explore HPA axis functioning one day, one week, three weeks, and six weeks following the cessation of substance abuse. The addition of other neuroendocrine probes such as vasopressin and metypyrone to CRH administration will allow us to describe HPA axis alterations during withdrawal and abstinence in great detail.

Budget:

Half-time physician	$ 40,000
1.5 research technician ($22,000 ea.)	$ 33,000
One research RN	$ 32,000
Supplies and equipment	$ 5,000
Sample analysis	$ 20,000
Total	$130,000/yr for 3 years

c. It has been suggested that the marked overactivity of the HPA axis during withdrawal produces brain damage. In order to study this question, we propose to evaluate rats previously addicted and subsequently withdrawn from alcohol. We expect that rats who have experienced multiple episodes of withdrawal will demonstrate more significant neuroanatomical and biochemical changes than those who have been withdrawn fewer times. Various medications will be administered to evaluate the protective effects offered by these medications on the putative neurotoxic effects of withdrawal. Medications that appear useful in ameliorating the damaging effects of withdrawal will be studied clinically.

Budget:

2 Research Technicians ($22,000 ea.)	$44,000
4 Vapor Chambers	$16,000
Supplies	$10,000
Histology	$ 7,000
Total	$77,000/yr for 3 yrs

Module 4: Substance Abuse Vulnerability and Treatment Research in Children and Adolescents

Personnel: R. Sallee, M.D., Ph.D.- Director, A. Finch, Ph.D., K. Brady, M.D., Ph.D., D. Carek, M.D.

Objectives:

1. To delineate the biological and behavioral characteristics of children at high risk for substance abuse (SA).

2. To derive subtypes of vulnerability in the young and to elucidate pathways by which vulnerability interacts with micro- and macro-environmental influences to produce a substance abuse outcome. We propose to accomplish this aspect by studying comorbidity in adolescent substance abusers and to study the epidemiology of SA in populations hypothesized to be at risk such as children with conduct disorder and attention deficit disorder with hyperactivity.

3. To develop effective treatment strategies in adolescent substance abusers focusing on biologic treatments:

   a. Desipramine treatment
   b. Dopamine blocking agents, e.g., pergolide, pimozide
   c. Dopamine uptake inhibitors, e.g., GBR

Rationale:

It is well-established that substance abuse (SA) aggregates in families of substance abusers. Having a substance abusing father has been reported to increase the offspring's risk by as much as ten fold of also becoming a substance abuser. Hence, there is overwhelming evidence that biological offspring of substance abusers are at increased risk for a SA outcome. Thus any study of SA vulnerability in children should target the offspring of substance abusers prospectively and should study SA in children and adolescents concurrently with family risk factors. Our hypothesis is that 1) high risk children can be distinguished by their unique responses to a number of challenge tests and biological parameters including platelet adenylate cyclase activity, MAO activity (e.g., lower platelet MAO), monoamine and catecholamine responsivity (e.g., lower free plasma 5-HIAA); 2) SA children and adolescents have comorbidity features similar to the adult population of anxiety disorder and depression which compound inherent biological vulnerability factors; 3) environmental influence, family stability, peer relations and personality traits can discriminate the high risk group and may interplay with biological risk in an as yet to be determined fashion; 4) SA treatment modalities in the young are likely to be more effective and to be different from adult treatments depending upon patterns of abuse; 5) biologic treatments can be effective in correcting patterns of abuse in the young SA patients.

Present State of the Field:

No effective biologic or psychological treatments have been demonstrated in children or adolescents suffering from SA. Little is known about the factors which predispose certain children and youth to SA.

Whereas a compelling body of evidence suggests that alcohol abuse is not randomly distributed in the population and biologic risk factors are currently being identified, there is no such body of knowledge for cocaine or stimulant abuse.

Plan:

Currently 20% of all children and adolescents admitted to the Youth Division inpatient service have comorbidity of psychiatric diagnosis and either drug or alcohol abuse. This amounts to fifty inpatients per year and over 1500 bed days currently devoted to this type of youth with SA. We plan to broaden and expand our current efforts to admit over 100 child and adolescent substance abusers per year. Biologic vulnerability studies and treatment research protocols are difficult in outpatients due to problems with compliance and blood sampling. Therefore, these patients will receive a thirty day inpatient assessment and treatment protocol including neuroendocrine, neurophysiological, neuropsychiatric, and neuropsychological assessment. Multiple laboratory tests and biological assays will be performed on each child ranging from plasma catecholamine levels to CSF samples.

Personnel:

The research treatment team will consist of two fully trained child and adolescent psychiatrists with a research focus in SA. In addition, a neuropsychologist, masters level nurse clinician, and four psychiatric technicians will comprise the team.

Budget:

1. Personnel	$400,000 per year
2. Bed-days for 100 patients X 30 days X $500/day =	$1,500,000*
3. Clinical laboratory costs	$150,000 per year

Module 5: Further Clinical Research Directions for the Center for Substance Abuse Research

Personnel: R. Anton, M.D. - Director

1. Development and examination of **"kindling models"** in animals and a further examination of the kindling phenomenon in the clinical population. This would cut across the cocaine and alcohol fields and would include phenomenology, biology, and prevention strategies.

2. The role of the **dopamine system** in the behavioral and rewarding/reinforcing effects of alcohol and cocaine. This could utilize animal models and clinical samples (lymphocytes, plasma, and urine HVA levels, under stimulation and inhibition strategies).

3. The effects of **prenatal drug exposure** on subsequent neuropsychological development. This could be done with animal models and with children. The issues in #2 above can also be explored in this population.

4. The role of **membrane transduction process** in drug effects. The focus here can be clinical such as in the identification of alcoholics with the use of adenyl cyclase activity in the platelet or lymphocyte or in cell cultures taken from the affected populations. At the basic level, much work needs to be done to better identify the role of illicit substances on these systems (chloride channel, calcium transduction mechanisms, cAMP, G proteins, etc.). These processes may relate to #1 above.

5. The better description of the **comorbidity** of psychiatric disorders and substance abuse with particular emphasis on the treatment, both psychologic and pharmacologic, of the **"dual diagnosed"** patients. In this regard, many new drugs will appear on the horizon in the next five years which will have the preclinical pharmacological profile to support their use in clinical trials. One example is the whole class of $5HT_3$ antagonist compounds which are showing benefit in reducing alcohol consumption in animals.

6. The role of **drug abuse in domestic aggression** and its treatment. This area may be ripe for the use of serotonin acting drugs or the combined use of serotonin drugs and family therapy intervention.

7. A double blind clinical trial comparing pergolide, carbamazepine, and placebo **in cocaine addicts** following up the extremely promising preliminary work suggesting a marked reduction in cocaine abuse.

*Some significant portion of these costs can be offset by third party payment, medicaid, and potential contracts with the Department of Mental Health to provide care for their clients in this area.

Basic Research

Module 1: Cocaine Receptor Research

Personnel: Floyd R. Sallee, M.D., Ph.D. - Director, Molecular Genetics Faculty, TBH, Neurochemist/Neuropharmacologist Faculty, Post-Doctoral Positions: 4 TBH in specific research areas including: CNS pathology and receptor characterization in brains of cocaine overdose deaths and cocaine abusers; Molecular cloning and eukaryotic expression of the cocaine receptor; Homology probing for cocaine receptor variants and related proteins by PCR; Linkage and genetic studies of families of substance abusers.

Specific Aims: The overall aim of this module is the isolation and purification of the cocaine receptor and cloning of the cDNA coding for this protein. Our reasoning is that basic understanding of this receptor will rapidly lead to the development of specific and effective treatments. Our strategy is to employ three separate but inter-related methods of isolation which capitalizes on our recent success in photolabeling the cocaine receptor utilizing aryl-azide analogs of aryldialkylpiperazines (the GBR series).

1. Affinity-chromatography purification of the cocaine receptor will be accomplished utilizing immobilized GBR ligand analogs.

a. Pharmacological characterization of the affinity purified protein and photolabeling of this protein using the high affinity (1-2nM) radioiodinated photoaffinity probe, 1-(2-[bis-(4-fluorophenyl)-methoxylethyl)-4-(2-[4-azido-3-[^{125}I]iodophenyl]ethyl)piperazine ([^{125}I]FAPP) will be conducted to define the affinity-purified protein as the cocaine receptor.

b. Preparation of a polyclonal antibody in the rabbit will be accomplished using the reduced and SDS-denatured cocaine receptor protein so that one antibody could be used to recognize the fusion protein products expressed in *E. coli* and be used in an expression cloning strategy outlined in the specific aim 3. The other antibody against the native form of the protein can be useful as an immunofluorescence probe to detect receptor expressed on the appropriate host cell surface.

2. High performance liquid chromatography (HPLC) separation and purification of the cocaine receptor subsequent to photoaffinity labeling with [^{125}I]FAPP. [^{125}I]FAPP is covalently bound to the cocaine receptor so that it may be followed and identified in an HPLC purification protocol.

3. Expression cloning of the cocaine receptor initially by screening a rat striatal library in the phage vector gt11 utilizing the affinity of the fusion proteins for radioligands selective for the dopamine uptake site such as [^{3}H]GBR-12935 (1-[2-diphenylmethoxy]ethyl)-4-(3-phenylpropyl)piperazine) and a fluorophenyltropane analog 2β-carbomethoxy-3β-(4-fluorophenyl)-tropane ([^{3}H]CFT). If a suitable polyclonal antibody from 1b can be obtained, the rat striatal library can be subjected to antibody screening after the method of Young and Davis (1).

4. Testing of a wide range of pharmacological agents which are known to block the cocaine receptor, such as the mazindol series (SANDOZ, Inc.) which could potentially block the site of the cocaine attachment to the receptor but have no intrinsic effect on their own. These studies will first be done in vivo with rodents and finally monkeys in collaboration with Dr. B. Madras, Harvard.

Facilities/Budget Requirements: 2400 square feet of additional laboratory space with approximately $250,000 in additional equipment in the first year. Salary costs for the three faculty members and four postdoctoral positions are approximately $404,000/year with each researcher requiring $20,000/year in supplies. Additional support staff of one lab manager and one secretary will also be required at $40,000/year. Total cost for the first year is estimated at $826,400 with direct costs over the entire five year period approximately $3,100,400.

Module 2: Fetal Alcohol Syndrome: Mechanisms and Long-Term Effects

Personnel: Carrie Randall, Ph.D., Director

Introduction: The deleterious effects of drinking during pregnancy have been reported since the time of recorded history. However, Fetal Alcohol Syndrome, as it is known today, was not identified until 1973. Clinical scientists at the University of Washington observed a common pattern of defects in children of alcoholic mothers. The children were observed to have three cardinal features which set them apart from other clinical syndromes: 1) prenatal/postnatal growth deficiency, 2) central nervous system dysfunction, and 3) peculiar craniofacial defects, as well as an increased incidence of various types of malformations. The constellation of defects was labelled Fetal Alcohol Syndrome. Case reports from around the world confirmed the existence of the syndrome, and emphasized that the teratogenic effects of alcohol are not specific to a single patient population or nationality.

This laboratory has focused on the development of animal models of Fetal Alcohol Syndrome for over a decade. Our research received national and international attention for demonstrating that alcohol is a potent teratogen in mice in the absence of confounding nutritional variable. We further demonstrated the importance of critical periods and critical doses for expression of the teratogenic effect. Reliable animal models of the teratogenic effect of both binge and chronic drinking in pregnant mice have been developed, and we have observed important strain differences in the response to alcohol. More recently, we have been involved in searching for the mechanisms underlying the teratogenic actions of alcohol. Once the mechanisms of alcohol-induced fetal abnormalities can be identified, it may be possible to eventually prevent, or therapeutically intervene to reduce the adverse consequences of drinking during pregnancy. In this proposal, we would propose to continue two themes of our recent work: 1) potential mechanisms of action and 2) long-term effects of prenatal alcohol exposure.

Potential Mechanisms

Prostaglandins: We are investigating the role of prostaglandins in mediating the teratogenic actions of ethanol using a binge drinking mouse model and, most recently, term human placentas. Our result, which has attracted a great deal of attention from the scientific community, is the observation that the frequency of alcohol-induced birth defects could be reduced by nearly 50% if mice were administered the prostaglandin synthesis inhibitor, aspirin, prior to alcohol administration. (Administration after alcohol was ineffective in reducing the teratogenic effects of alcohol.) We plan to pursue these studies to find out how aspirin exerted its protective effect by using prostaglandin inhibitors with different mechanisms of action, different strains of mice, and further refining our tissue preparation in order to partition where the effect might be occurring (i.e., fetus, uterus, placenta). We also would like to investigate the effect of aspirin pretreatment on reducing the effect of "chronic" alcohol administration, and on various teratologic insults (e.g., growth retardation, birth defects, behavioral effects).

Our studies with the term human placenta have only just begun. We are in the process of developing the necessary technology for obtaining the clinical samples, perfecting the skill required for perfusing the tissue, identifying appropriate times for collecting the samples, and developing optimal methods for analyzing the prostaglandin levels. This technology is performed by only a handful of laboratories in the world. It is enormously powerful for studying not only the effect of alcohol on prostaglandin release from normal placentas, but from placentas of chronic alcoholic women. It can also be used to study the effect of other drugs of abuse, such as cocaine, which are thought to affect the placental vasculature, alone and in combination with alcohol.

Cellular mechanisms: Related to our prostaglandin work is a proposed theme that utilizes cell cultures. This technology is not currently available in our laboratory. However, the possibility of looking at alcohol-induced cell-cell interactions on a biochemical basis in developing tissue (both alone and in the presence of prostaglandin inhibitors) may provide some important information regarding the molecular actions of alcohol. The development of a technology referred to as "whole embryo culture" would complement these studies. In this procedure, rat embryos are raised outside of the mother in culture for 48 hours. The technique permits evaluation of uptake of essential nutrients, and permits the experimenter to manipulate the embryonic environment of mammals without maternal or placental interference. The technology is ripe for a study related to the mechanisms of action of alcohol on the developing fetus, especially since strain differences in susceptibility exist. The different strains could be used as tools to identify biochemical differences between the strains that are not mediated by the drug's effect on the mother or the maternal-placental-fetal unit. Thus, the cellular studies would reveal the direct effects of alcohol on the embryo and studies in the whole animal would be used to assess the indirect effects.

Long-Term Effects

Tolerance/Dependence: The effect of alcohol exposure on the subsequent development of alcohol (and other cross-tolerant drugs) tolerance and dependence is an area of interest because of its clinical relevance. Children of alcoholics are at an increased risk for developing alcoholism, although it remains to be elucidated exactly what is inherited. By systematically examining the responses of the offspring to acute and chronic alcohol challenge, and by evaluating the response to other compounds, it may be possible to not only identify changes in the organism's sensitivity to alcohol but to gain insight into the uniqueness of the response to alcohol. These studies might have relevance to studies of mechanisms of action, as well, since the biochemical actions of the benzodiazepines at the membrane level, for example, are more clearly defined than for alcohol.

Remediation of Behavioral Deficits: Very little has been done to attempt to develop pharmacotherapies or behavioral/environmental therapies to treat offspring of alcoholic mothers who have impairments in central nervous system function. This is an area of clinical importance that could benefit greatly from results of animal studies. Animal models are well-established that parallel clinical observations, and it would be fruitful to apply some well-documented interventions in a systematic manner before clinical trials are attempted. The entire area of remediation/intervention is critical for clinicians. The diagnosis of Fetal Alcohol Syndrome is of little importance if clinicians cannot provide the parents with any form of treatment or intervention that could be applied to offset the deficits. The diagnosis, alone, might actually result in maternal guilt and interfere with the maternal/child bond. For these reasons, the animal studies would be paralleled by clinical studies in children of alcoholic mothers.

Budget: Proposed First-Year Budget

Personnel		
Ph.D. Research Associate (prostaglandins)	$40,000	
Ph.D. Research Associate (Cell cultures)	$40,000	
Senior Research Assistant (biochemistry)	$30,000	
Laboratory Assistant (biochemistry)	$18,000	
Laboratory Assistant (behavior)	$18,000	
Graduate Student	$12,000	
Data Management Analyst	$18,000	
		$176,000
Equipment		
Ultra-low freezer	$ 6,000	
Centrifuge	$ 6,500	
Speed-vac	$ 6,000	
Embryo culture system	$ 6,000	
Cell culture hood	$10,000	
Water bath	$ 2,000	
Scintillation counter	$18,000	
Computer workstation/printer	$10,000	
Balances	$20,000	
Refrigerator	$ 800	
Incubators	$ 2,000	
Animal cages/tops	$10,000	
		97,300
Supplies		
Animals (purchase/housing)	$15,000	
Lab supplies	$20,000	
Radioactive compounds	$10,000	
Consummable supplies	$ 3,000	
		48,000
Other		
Copying charges, publication costs	$ 3,000	
Computer software (statistics/ graphics)	$ 1,000	
		$ 4,000
		$325,300

The 02-05 budget would increase in Personnel by 8% (cost of living/merit pay), and all other costs are projected to increase by 10% each year. The equipment request for the 02-05 year is $10,000/year.

Module 3: Exposure to Cocaine and Methamphetamine During Pregnancy: Effects on Motor and Reward Systems during the Life-span of Offspring

Personnel: L. Middaugh, Ph.D., Director

Introduction

NIDA recently established perinatal substance abuse as one of its target areas for research. The recently documented increase in the use of cocaine and its possible effects on the newborn, and hints that the use of methamphetamine ("ice") is increasing has prompted interest in research on the consequences of prenatal exposure to the compounds. Due to polydrug use, nutritional factors, and a host of other confounding variables, human studies cannot clearly define whether any of the effects observed in babies of drug users is actually due to the drug or other issues. Because of this lack of control, animal models are important.

The proposed research is designed to investigate the long-term consequences on offspring resulting from maternal exposure to cocaine and methamphetamine ("ice") using a rodent model. We hypothesize that prenatal exposure to these compounds will have life-long effects on behavior mediated by neural systems utilizing dopamine as a neurotransmitter. Both drugs cross the placenta and influence developing dopaminergic neural systems. Neurobehavioral teratologic studies have established that developing systems are particularly sensitive to drugs and that the effects can be long lasting. In addition, it is well documented that methamphetamine can cause neural degeneration in dopaminergic systems. Dopaminergic systems are involved in the mediation of a number of behaviors. Of particular importance for the proposed research is that substantial evidence confirms a role of dopamine systems in mediation reinforcement (reward) and motor behavior. Accordingly, prenatal exposure to either drug during the early development of DA systems should result in dysfunctional motor and reward systems. The importance of dysfunctional motor systems is evidenced by such diseases as Parkinsonism. In addition, one of the most basic problems of aging is a decline in motor capabilities, and one of the most consistent research findings in the aging literature is a reduction in the number of dopamine receptors. The importance of reward or reinforcement systems is that our behavior is to a large extent determined by rewards or reinforcement. Indeed, these mechanisms (particularly those involving the mesolimbic system) are important in the reinforcing/addictive effects of abused drugs. Thus, our research will investigate the effect of prenatal exposure to cocaine and methamphetamine on motor function and on the reinforcing effects of drugs and other reinforcing stimuli. Groups of mice will be evaluated at several stages throughout their life-span, hence we will be able to determine if prenatal drug exposure will alter the aging process in brain function. Also, the relationship of any changes in motor function or reinforcement efficacy to dopamine systems will be assessed by parallel studies with pharmacological probes using DA agonists and antagonists, neurochemical studies of DA synthesis, release, and degradation, and dopamine receptor studies.

Background: A review of the literature regarding the prenatal effects of amphetamines can be found in [Middaugh LD, "Prenatal Amphetamines." *Ann. N.Y. Acad. Sci.* 562:308-318, 1989]. Prenatal cocaine may well have similar effects. Recent publications by Spear and Dow-Edwards suggest that prenatal cocaine exposure alters dopamine systems of young rats as indicated by altered response to DA agonists and antagonists and altered binding to DA receptors.

General Design: Mice will be time bred and injected with the drugs daily beginning on Gestation Day 12 and continuing until parturition on Gestation Day 19. This period is roughly equivalent to the second trimester in humans and covers the early development of the DA system. Doses for cocaine will be 20, 40, and 80 mg/kg. These doses have been shown to produce substantial levels of cocaine in rat fetuses. Amphetamine will be given in doses of 2.5, 7.5, and 22.5 mg/kg. The offspring will be fostered to surrogate mothers to establish that any noted effect is due to prenatal rather than maternal variables. Groups of the offspring will be tested at 1, 3, 6, 12, 18, and 24 months. Mice are in adolescence at 1 month, are fully mature at 3 months, and are senescent at 24 months. The offspring will be evaluated throughout their lifespan. Since the unit of analysis is the litter, individual litter members will be distributed among the various tests and no more than one litter will be represented in any experimental cell.

1. Cocaine and amphetamine assays. Bill Boggan, Ph.D. (Ken Patrick, Ph.D.)

Drug assays are needed to determine how much drug is reaching the fetus and to establish if prenatal exposure to the drug in any way alters its distribution when given later in life. This of course would result in altered reinforcing properties of the drug or its effect on motor systems. These will be completed in the mothers, the fetuses, and the offspring at the above stages of life.

2. Motor Behavior Studies. Larry Middaugh, Ph.D.

Motor behavior will be assessed at the frequency describe in the General Designs section utilizing Omnitech Motor activity monitors interfaced to IBM computers. Various types of motor activity will be assessed at 1 minute intervals for 20 minutes. These tests will include basal levels as well as changes induced by DA agonists (apomorphine) and antagonists (haloperidol) as well as challenges with amphetamine and cocaine. All of the procedures are used routinely in our laboratory.

3. Reward System Studies. Larry Middaugh, Ph.D.

To assess whether prenatal drug exposure alters the reinforcing properties of drugs and other reinforcers later in life, we will utilize operant behavior techniques. Various forms of these procedures have been used to assess prenatal drug effects for many years. One the methods used in our laboratory to assess reward function is to test animals on a Progressive Ratio schedule of reinforcement. This schedule requires the animal to make an increasing number of responses per unit of reward. The animal will stop responding when the reward no longer warrants the effort. Increasing or decreasing the value of rewards results in higher and lower response output respectively. We have tested mature mice prenatally exposed to either phenobarbital or alcohol using this procedure. Both have a reduced response output suggesting a reduction in the reinforcing value of food.

This procedure has also been used in other laboratories to assess the reinforcing value of drugs. Mice can be cannulated and trained to make a response for a drug injection. Drugs with a rapid onset of effect such as cocaine and amphetamine are particularly well suited for this procedure. After drug responding is established, the schedule is increased until the animal will no longer respond. Increases or decreases in the reinforcing value of the drug is established by termination of responding at higher and lower response to reinforcement ratios respectively.

4. Neurotransmitter studies. Bill Boggan, Ph.D.

Animals will be sacrificed, again at the various assessment periods described in the General Design, and the caudate and nucleus accumbens will be dissected out for analysis of DA content. Other tissue will be used for DA uptake and release studies. Finally, DA turnover will be estimated by determining the rate of decline in DA concentration after synthesis inhibition with a tyrosine hydroxylase inhibitor. All of these procedures are commonly used in our laboratory.

5. Dopamine Receptor Studies. Randy Sallee, M.D., Ph.D. (Bob Beckstedt, Ph.D.)

As noted above, DA receptor number declines with age and prenatal cocaine has been reported to down regulate the DA receptor system in young rats. The proposed studies will allow us to determine if the prenatal drug exposure accelerates this decline that normally accompanies the aging process.

Personnel

This laboratory has been involved in perinatal substance abuse for 15 years. It has contributed both research and theoretical papers to the literature on the effects of prenatal exposure to barbiturates, opiates, alcohol, and amphetamines. All the investigators are internationally recognized for work in this area. In addition we have contributed to the substance abuse area by serving on IRG's and Concept Review Committees for NIDA as well as consulting for projects of the FDA and EPA.

L. Middaugh will be the PI for the project and will assume responsibility for scheduling experiments and coordinating behavioral and biochemical experiments.

Budget

Prenatal drug studies are relatively expensive due to animal costs. Combining prenatal drug exposure with studies on aging increases these costs because the animals need to be maintained for extensive periods of time--up to 2-2½ years.

The personnel and supply budgets described below, are substantial due to the interdisciplinary nature of the research. In the long run, however, this approach will be economically efficient because litter mates can be efficiently utilized for behavioral and biochemical studies while still maintaining the litter as the unit of analysis.

Personnel	% of Appt.	Salary	
Middaugh	50	25,000	
Boggan	20	11,000	
Sallee	15	14,000	
Behav. Tech	100	25,000	
Recep. Tech	100	25,000	
HPLC Tech	100	25,000	
Data Analyst	50	10,000	
Animal Tech	50	10,000	$145,000

Consultant Costs: Consultant to help set-up drug self-administration	2,500
Equipment Omnitech Motor Activity monitoring system 2 @ $12,455 Operant Chambers for drug self-administration 6 @ $4,000 Pumps for drug self-administration 6 @ $2,000 Computers and Laser Printer $5,500	66,410
Supplies Animal Purchase - $3,000 Animal Perdiem - $24,000 Behavioral Laboratory Supplies - $6,000 HPLC Supplies - $6,000 Isotopes and supplies for receptor studies - $16,000	55,000
Travel: Domestic travel	3,000
Other Expenses Publications - $2,500 Repairs - $2,000 Service Contracts - $1,200 Computer Supplies - $1,500	7,200
TOTAL COSTS FOR FIRST 12-MONTH PERIOD	$279,110

Budget for Proposed Project Period (5-Years

	Yr 1	Yr 2	Yr 3	Yr 4	Yr 5
Personel	145,000	153,700	162,922	172,697	183,059
Consultant	2,500	-0-	-0-	-0-	-0-
Equipment	66,410	-0-	-0-	-0-	-0-
Supplies	55,000	57,750	60,638	63,669	66,853
Travel	3,000	3,150	3,308	3,473	3,647
Other	7,200	7,560	7,938	8,335	8,752
TOTAL	279,110	222,160	234,806	248,174	262,311

Additional Request Renovation of animal colony room to upgrade air-handling system $750,000

Module 4: Role of Excitatory Amino Acids, Particularly N-Methyl-D-Aspartate, in the Action of Abused Drugs

Personnel: W. Boggan, Ph.D., Director

Introduction: We propose to examine the role of the excitatory amino acids, particularly N-methyl-d-aspartate (NMDA), in the development of tolerance and dependence to abused drugs. This proposal is grounded in recent research demonstrating a role for NMDA in the actions of both phencyclidine (PCP) and ethanol and perhaps opiates.

For example, the dissociative anesthetic PCP has been shown to be an indirect antagonist of NMDA. Its site of action appears to be within an ion channel of the NMDA receptor complex. Thus, PCP's effects on neuroendocrine function, alterations in memory, and anticonvulsant properties could be mediated via its action at the NMDA receptor since NMDA itself participates in these processes. Further, both acute exposure and prenatal exposure to ethanol has been shown to alter NMDA receptor function. Thus alcohol's effects on memory, neuroendocrine systems and neuronal excitability could also be explained via NMDA system action. To our knowledge little if any attention has been given to the possible role of excitatory amino acids in the development of tolerance and dependence. This seems like a logical direction for future research because of the findings presented above and the well known behavioral manifestations of withdrawal ("wet dog shakes," jitteriness, seizures, or seizure susceptibility). These latter behavioral features may reflect supersensitive NMDA receptors and/or an imbalance in the balance of CNS inhibitory and excitatory (NMDA) systems.

Experimental Plan: In order to begin to test these hypotheses, I propose the following experiments

1. In order to be able to correlate neurochemical with behavioral manifestations, the initial studies will establish both dose and time parameters for the establishment of tolerance and dependence in rats. Various behavioral measures (such as incidence of seizures or seizure susceptibility during withdrawal) will be utilized to pinpoint milestone stages in these processes. Once these milestones are established, then the studies will proceed to the neurochemical studies outlined below.

2. Examination of the concentration and endogenous release of the amino acid ligands (aspartate and glutamate) for NMDA receptors in select brain areas known to be important in drug and NMDA action (e.g., hippocampus). These will be determined at different times during the development of tolerance and dependence and will be accomplished in freely moving rats using in vivo dialysis. The dialysate will be analyzed with high performance liquid chromatography. This is state of the art technology which is now being used world wide but is not available at MUSC.

3. Examination of the number and affinity of NMDA receptors at different stages during the development of tolerance and dependence. We will utilize quantitative autoradiography in some of these studies which will allow us to determine whether any changes that manifest occur in selected brain areas.

4. If NMDA receptor function is found to be altered during the development of tolerance and/or dependence, then subsequent studies would determine the potential role of the various NMDA receptor regulators (e.g., glycine, guanine nucleotides, Mg_2, PCP receptor) in the alterations observed. These studies would utilize sensitive radioligand binding techniques to detect these influences.

Budget (5 year projection):

Personnel:	Research Scientist (50%): $27,000/yr X 5 yr	$135,000
Equipment:	In vivo Dialysis Set Up	$ 25,000
	Sartorius Balance	$ 2,595
	MacIntosh Computer	$ 6,500
	Microfiltration Apparatus	$ 8,500
	Tabletop Centrifuge	$ 10,500
Supplies:	Animal and Animal Maintenance Isotopes, Counting Supplies, Chemical Reagents, Autoradiographic Supplies	$125,000
Travel:		$ 10,000
Other Expenses:	Maintenance Contracts (Centrifuge, Counter, Balance), Radioactive Material Disposal, Telephone, Publication, Xerox, Office Supplies	$ 25,000
	TOTAL	$348,095

Module 5: Mechanisms underlying alcoholism and the alcohol withdrawal syndrome: Investigations on the Role of the GABA Receptor Complex

Personnel: Howard Becker, Ph.D., Director

Introduction: Alcohol is perhaps the most widely used psychoactive substance by man. The enormous medical and social problems related to alcohol consumption underscore the prevalence of its use and abuse in our society. As with other illnesses, it will not be possible to prevent or therapeutically treat alcoholism and other alcohol-related disorders until a better understanding of the underlying molecular mechanisms are identified. However, despite the pervasive use and abuse of alcohol in society, the neurochemical mechanisms underlying the diverse effects of alcohol are, for the most part, unknown.

Our laboratory has been investigating mechanisms underlying the intoxicating effects of alcohol as well as mechanisms underlying the development of tolerance and dependence on alcohol. In particular, we have focused on the interaction of alcohol with the major inhibitory neurotransmitter gamma-aminobutyric acid (GABA). More specifically, we have been studying the role of the GABA receptor complex in mediating both acute and chronic effects of alcohol. This receptor system exists in the brain as a membrane-bound protein complex with binding sites for a variety of compounds such as the barbiturates and benzodiazepines, as well as certain drugs that promote the occurrence of seizures. Indeed, the pharmacological effects of these compounds (including alcohol) are known to be produced through an interaction with this receptor complex. Importantly, drugs that modulate the activity of the GABA receptor complex have a profound influence on the effects of alcohol, as well as the alcohol withdrawal syndrome.

We are currently studying the mechanisms and conditions under which such drug treatments influence the actions of alcohol. These studies have primarily been limited to acute drug treatments. Additional studies are planned to examine whether chronic treatment with drugs that modulate the GABA receptor complex are effective in altering the neurobehavioral actions of alcohol. More specifically, studies will be designed to examine whether chronic treatment with drugs that act at the benzodiazepine binding site on the GABA receptor complex (benzodiazepine agonists, antagonists, and inverse agonists) influence sensitivity to the acute actions of alcohol as well as the consequences of chronic alcohol exposure (development of tolerance and dependence). Further, the effects of both intermittent and continuous chronic treatment regimens will be studied, as these treatment regimens have been shown to have different effects on the GABA receptor complex. These studies have the potential of providing important and valuable information toward the development of effective treatment strategies for individuals suffering with alcoholism and other alcohol-related problems.

Most recently, our attention has focused on the role of the GABA receptor complex in the alcohol withdrawal syndrome. The withdrawal syndrome results from cessation of alcohol consumption in individuals that are rendered physically dependent on the drug as a function of chronic use/abuse, and is generally characterized by autonomic nervous system activation (restlessness, tachycardia, hypertension, tremors), neuronal excitation that may culminate in seizures, and distortions in sensation and perception which may be manifested as hallucinations and delirium. A variety of drugs that act at the GABA receptor complex can influence the alcohol withdrawal syndrome, depending on how they modulate the receptor. Benzodiazepines, for example, are widely used as the drug therapy of choice in the clinical management of alcohol withdrawal, since these drugs are effective in alleviating most of the symptoms associated with the withdrawal syndrome.

Recently, we have found that the experience of undergoing alcohol withdrawal can sensitize the individual to subsequent episodes of withdrawal. That is, the severity of the withdrawal syndrome is increased in animals that have previously experienced alcohol withdrawal. Studies are planned to examine whether repeated withdrawal from alcohol alters subsequent sensitivity to alcohol, as well as sensitivity to drug treatments that are typically employed in the clinical management of alcohol withdrawal (benzodiazepines). We would also like to extend this important and clinically relevant finding by examining whether changes in the GABA receptor complex may represent the biological event underlying this phenomenon. Studies will be designed to assess whether the binding characteristics of the receptor complex are altered in animals that have experienced multiple alcohol withdrawal episodes in comparison to animals that have experienced only a single withdrawal episode. Controls will be included to equate the amount of alcohol exposure among the two experimental groups. These binding studies will also include assessment of the coupling of the various binding sites on the GABA receptor complex which bear an allosteric relationship to each other. In addition, functional assays of GABA-mediated chloride (^{36}CL-) flux will be examined in the two groups of animals. The time-course and duration of such receptor changes will be examined as well, since the phenomenon is inherently time-dependent. These studies will provide important information about the role of the GABA receptor complex in the alcohol withdrawal syndrome, and in particular, the exacerbated symptoms of withdrawal that result from repeated withdrawal episodes. Such information has the potential of importantly contributing to the development of treatment strategies that not only treat the withdrawal syndrome as a unitary event, but will effectively prevent or retard the process(es) underlying a potentially more dangerous clinical problem - the exacerbation of symptoms associated with subsequent withdrawal syndromes.

In summary, the overall aim of this research program is directed at understanding the mechanisms underlying alcohol intoxication as well as the development of alcohol tolerance and dependence which result from excessive use/abuse of alcohol. Particular emphasis is placed on investigating the role of the GABA receptor complex in mediating the consequences of both acute and chronic alcohol exposure. The ultimate goal of this research endeavor is to gain a better understanding of the etiology, pathophysiology, and pharmacologic treatment of both acute alcohol effects and alcoholism.

Budget:	Ph.D. Investigator	$ 45,000
	Technician	$ 25,000
	Equipment	
	Liquid scintillation counter	$ 20,000
	Refrigerated centrifuge	$ 12,500
	Brinkman Polytron and glass/teflon tissue	$ 4,000
	Cell harvester	$ 6,500
	Ultra-cold freezer	$ 7,000
	Refrigerator	$ 1,000
	pH meter	$ 2,000
	Water/Bath Shaker	$ 3,000
	Balance	$ 3,500
	Spectrophotometer for protein assays	$ 5,500
	Vortexers, stirrers, glassware pipettes	$ 10,000
	High pressure liquid chromatographers with ultraviolet detector and computer-assisted integration	$ 50,000
	Supplies	$ 25,000/yr
	Total	$220,000/yr
	Three Year Total	$660,000

STATEMENT OF DAVE N. HIERS, DIRECTOR, LOWCOUNTRY COMMISSION ON ALCOHOL & DRUG ABUSE

Senator HOLLINGS. Before you do that, let's hear Mr. Hiers. Aren't you with the alcohol and drug abuse commission?

Mr. HIERS. Yes, sir; I am with alcohol and drug abuse.

Senator HOLLINGS. I am glad you didn't hit the poor doctor over there.

Mr. HIERS. No; I agree with what he says. I agree with a lot of what Dr. Ballenger said. But I come from a little different perspective.

But first I want to thank you for the opportunity to be here and thank you for your support in the past.

My primary reason for being here is that I am very concerned over what I perceive that the notion of addressing addiction in this country is, and that seems to be totally focused on controlling of addicts, and I don't think that is going to happen. I call that the great paradox of treatment. I don't believe anybody in this room that's ever treated an alcoholic would hold out any hope to their spouse if they came to them and said, "Listen, I want to deal with the problem by pouring out their alcohol and throwing out their drugs." What's happening will be a great paradox. When they try to do that, they are going to prove to them they can't do it. Every addict I have ever dealt with regardless of their addiction grew up in a dysfunctional system, and in that system they came to really resent that authority figure.

One of the reasons I'm in this field is I am from a dysfunctional family. My family is a sheer smorgasbord of dysfunctional behavior—alcohol, drugs, sex, work, action addicts, we got a little bit of everything.

But if we try to control it, I don't believe it's going to happen.

I will give you an example: My father was an alcoholic. He quit. I never saw the man take a drink while I was alive, but he transferred to religious compulsive behavior. He did that with as much zeal as any alcoholic I've ever met in 13 years of treatment. When he died in 1966, I went to a military school in the State. One of the first things they told me is that we don't allow drinking of alcohol here. Well, I had never really thought about drinking alcohol. I mean I was out of a real strict religious background, but when they told me I couldn't have it, you better believe I got some. And by the time I graduated, Senator, I got a medal for being the outstanding cadet running a bootleg operation at the same time. That sounds a little funny until you understand that's where most addicts are. They are out of balance. They are projecting one thing to the public and doing another thing at the same time. I grew up with my father being a deacon in the church and looking real good in the community while he came home and abused his wife and kids.

Maybe I could explain it a better way. As Charlie pointed out we work on employee assistance programs in the State. My physician had a couple contracts, and I had a man that was referred to me. He came in and he walked in the door, we got a sign that says alcohol and drug abuse. He walked in the door and says, I don't need to be here. I don't have an alcohol or drug problem.

I explained to him that's not what it's about. We got a contract with your employer and when your work performance reachs a certain point, they're going to fire you. Before they do that, they send you down here, give you a chance to talk with me and let me try to work out something, help me address your problem and keep your job.

So then he started talking about it, and he came out and he said, let me explain why I made that first statement. He says, my daddy was an alcoholic, and I swore I would never be like him. And I have never touched a drop.

We kept on talking, and he said, "Yeah, I got a lot of problems and I can see how they affected my job." He said, "My wife is divorcing me, and I got two children who are alcoholics."

And he went on talking and before he walked out the room though, he told me, he said, "You know something? I am exactly like my daddy. I never touched a drop, but I picked up work just like he picked up alcohol."

Using the best example I can, he had the same rules and those rules have just been described by Dr. Claudia Black, and they are, I don't feel, I don't trust, and I don't talk. While those rules helped you maintain your sanity, that dysfunctional sanity, they limited the pain there. They virtually guarantee that you will carry that system all the way. So how could he possibly have an intimate relationship with his family because he had never seen one.

Senator, I don't believe we will ever address addiction in this country until we start addressing all addictions, whether that's sex or gambling or alcohol or drugs or action addicts, or whatever. And to support that I'll just simply talk back to Alcoholics Anonymous and their 12-step process which you keep referring to. That first step is that I realize that I was powerless over my addiction. I can't control it. And we have to reach a point where we start treating all addictions.

We can no more treat addiction in this country than a surgeon in this town can treat a multiple gun shot victim by treating only his two worst wounds. We either treat the entire family and look at all addictions, or we are going to be doing this for a long, long time.

Thank you.

PREPARED STATEMENT

Senator HOLLINGS. Well, that is a very moving statement. We will insert your statement in the record at this point.

[The statement follows:]

STATEMENT OF DAVID N. HIERS

When I first received the request to appear before this committee my initial response was to ignore it. Then later that day I conducted a therapeutic group in which a young lady, for the first time since I meet her six months before, reached the point that she could allow herself to cry. It was at this point that it became clear to me that I had no choice, but to come before this committee. My initial reaction had everything to do with my own back ground, and nothing to do with the Committee.

For like that young lady I am an Adult Child of a dysfunctional family. The lady to which I have referred grew up with an alcoholic mother and step-father, and was sexually abused by that step-father. This person does not have a substance abuse problem as related to the consumption of substance. However, she has been seriously traumatized by the experienes of her childhood. Due to the fact that she grew up in an addictive family, she developed the same rules of behavior that her parents had. Those rules have best been phrased by Claudia Black, PhD: "Do Not Trust! Do Not Feel! Do Not Talk!" What most do not understand is that those rules work for you in the dysfunctional family. The addict cannot be trusted to follow through on his promises. He certainly does not want to talk about what he or anyone else feels. Therefore, the rules work to limit the emotional pain. However, at the same time they effectively prevent us from ever addressing our needs, and there-by prevent our recovery.

The point I wish to make to this Committee is that it is not just the family with substance abuse issues that are affected, but all family suffering through compulsive behavior disorders. The rules and core issues really do not change toany great degree whether we are talking about workaholics, sex addicts, gamblers, alcoholics, drug addicts, etc. They all have difficulty with core issues such as control. Growing up they had no control, and they developed the illusion that if they had it they could make it work. They are abandoned and alone. For it was easier to survive by limiting contact with others. They certainly have a negative self-image for they have received littly positive feed back.

The best example I can give of this is the first which I was knowingly faced with. A man came to me on Employee Assistance Program. The first thing out of his mouth as he was coming to Alcohol/Drug Counseling was that I have never even used alcohol or drugs. I then confronted him with the fact that his being or not being addicted really was not the issue. The bottom line for him was that his present behavior was placing his job in jeopardy. We got honest with each other then and he explained his opening statement. His father was an alcoholic. As we continued, he talked of his divorce, and the fact that both children were chemically addicted. However, as we proceeded on he came to state that he was just like his father. You see while he had avoided alcohol, he had maintained the same patterns of behavior that his father had.

By maintaing the rules: "Do Not Trust, Do Not Feel, and Do Not Talk." His family had followed the same pattern. His addiction was workaholism. He worked all the over time he could get and then came home to manage a business on the side that was full time operation. He worked and came home only to eat and sleep. He had no emotional involvement with his family. I then put to him that he had done the best he could based on the knowledge he had. With his life experience it would have been extremely unusual for him to give up the patterns of behavior which had limited his pain during his childhood years.

This past year at the State Convention for Adult Children of Alcoholics, the speaker stated that you can kill a plant two ways. One you can hack it to death, or you can simply ignore it. Either way the plant will be severely traumatized and die, and this is what takes place in a dysfunctional family.

We can no more treat addiction in this county by addressing only chemical addiction than a surgeon can treat a multiple gun shot victim by treating only his two worse wounds.

I would also like to advise this Committee of some of the problems being faced by rural service providers in the state.

The major problem I have experienced in my 13 years with Alcohol and Drug treatment has been maintaining employees. The Lowcountry Commission has and will continue to have difficulty in maintaining employees due to the salaries we offer our staff. Our beginning salary for a counselor is $14,000. When comparing this to other agencies around our area you can better appreciate this problem. A new treatment center opening in Beaufort will be employing a secretary at a salary of $14,500. We are also aware that a new Correctional facility in Allendale will have a position for Canteen Manager at $18,000. We recently lost our Prevention Coordinator to this new correctional facility. Her reason for leaving were: one, she was to receive a $3,000 salary increase, and secondly, she only hd to travel to one place, rather than traveling over three counties as we require. In the last two years we have lost five employees of our staff of ten due largely to salary level.

Secondly, we have limited physical space inwhich to operate. In Jasper County all of our group activities must take place in the hallway. In Allendale County we have only two offices to operate out of. In Hampton, we are constanly having to ask support staff to wait in the hall while a Counselor or Intervention Specialist interviews his or her client. This lack of space and poor condition of our facilities physically adds only insult to injury. We have very few paying clients as it is, and if I were a client who could afford better I certainly would seek services else where.

The majority of our clients are poor and have no means of transportation. The area my Commission services is composed of 1,600 square miles. It is extremely difficult to get people in for treatment services in the best of conditions, but with no means of transportation it is impossible for many to reach treatment.

The support group is the back bone of recovery. In the rural community these are few. In Charleston for example, you can locate a meeting any night of the week and other meetings during the day. In Allendale, Hampton and Jasper Counties, there are three AA groups, an Addictions Anonymous group, and one Adult Children's group. This lack of support groups, combined with transportation problems, makes it extremely difficult for those working toward their recovery.

References:
"Adult Children, The Secrets of Dysfunctional Families" by John Friel and Linda Friel, published by Health Communications, Inc.

The Addictive Organization by Anne W. Schaef and Diane Fassel, published by Harper and Row.

"Bradshaw on: The Family" by John Bradshaw, published by Health Communication, Inc.

Video: Claudia Black, "Children of Denial".

Senator **Hollings**. Dr. Ballenger, now, to win over Mr. Hiers we are going to have to prove from the research that we are doing some good.

I had the privilege of being over with you at your institute 1 month ago, and I met a Dr. Sallee on your research team, and I think as you indicated just in a casual referral that he had discovered some time last fall a receptor in the human brain for cocaine, is that correct?

Dr. **Ballenger**. He's real close.

Senator **Hollings**. He's real close.

If we can get that isolated, purified, and everything else, it might work on a block off of some kind?

Dr. **Ballenger**. Yes, sir; if you will let me go back and try to answer that, it's a really critical issue.

DIFFERENT METHODS OF TREATMENT

Senator **Hollings**. That's what I am trying to do. I am trying to bring the two sides together—yeah, this is like "Cross Fire."

Dr. **Ballenger**. Yeah. I don't think there is a conflict, but let me tell you there is a problem in the United States and if you ask the American public, which we have, why do people have psychiatric problems, including illnesses as bad as schizophrenia, 80 percent of the people think it's because of a moral failing.

Well, that from my perspective is just so wrong it's unbelievable, but that's sort of where we start. So this problem falls right in the middle of that prejudice, unfortunately.

I don't really see any conflict between the treatment methods that have evolved and what I am suggesting at all. I will give you a couple examples.

The one practical conflict is that I really do believe we should study what we spend our money on and make sure it's effective and do the things that are effective and not do the things that aren't effective. I think we ought to do that, just like we ought to figure out which cancer drug works and which one doesn't work, I think we ought to do that.

Some people would disagree with that. They say we shouldn't take time. We should just treat, treat, treat. I don't agree with that, so they might not like me saying that. But I don't have any conflict, because I see them as both helpful. To give you an example: For us to demonstrate to an adolescent son of an alcoholic that his body is different than his brother's, and that if he drinks, he's going to become an alcoholic with a 97-percent chance, I think through prevention efforts that boy will be better than they would be if you didn't know that fact.

Now, what prevention efforts?

Well, there's education and all the ones we have been talking about.

So there's not any conflict there.

I also don't see any conflict if we can figure out why the addict has such an intense craving that he can't stay away from the drug. If we could do something that would help cut that in half, or three-fourths, then all of our other influences would have a better shot of winning. So with that kind of perspective, I don't see any conflict between the two except the fact that they are different systems. They grew up in different traditions, and so they talk about good doctors and bad doctors, and there's that kind of a problem. They really do need to bridge that, and that's why I mentioned the notion of mainstreaming, because I think that needs to be done to put the resources of both systems together. It's just a shame that they are not, and it's a project.

DEVELOPMENT OF COCAINE RECEPTOR

The cocaine receptor is a great example of how money spent in the basic science laboratory could have a payoff that is unimaginably wonderful.

For instance, if the cocaine receptor in the brain, which is real—it appears to be very allied with the dopamine part of the brain, again the part that has to do with the craving and we think wild behavior and things like that. If we can isolate that, as soon as we can do that, it's a matter of months before you can find a chemical that fits in there and blocks its action.

If we could do that, then we could give that antagonist to the cocaine addict, and they could take all the cocaine in the western hemisphere and put it up their nose, and it wouldn't make any difference. Now, you can see what a difference that would make in law enforcement, supply and demand, and treatment.

Now, it's a long shot. If that one thing hits, however much money we spent finding that receptor and finding the antagonist, would be worth it 1 million times over I am sure. And I would suggest that it's those kinds of advances, you know, we tried to treat tuberculosis for hundreds of years with isolation and education and hygiene. And then we found out what caused tuberculosis. Seventy years later we had a drug that killed the bug, and tuberculosis is gone until we stopped using the drug, and now it's coming back again. It's the same thing with vaccines. So you will never convince me that we shouldn't spend a lot of effort in that regard, because that's what I do for a living. Of course, I pick the winner situation. We could miss, we could keep missing.

Senator HOLLINGS. Well, it seems like that has been the problem. There have been too many losers. There have not been any real dramatic breakthroughs, I would say, medically to gain the credibility—I agree with what you're saying. But I'm trying to search, and how do I gain credibility and acceptance? You say it will help you if you can get one or two or three at the research field and medicine to come forward and say here's what we have done, then all the others would begin to get in step with you. That would be really dramatic.

Dr. BALLENGER. I would like to suggest that part of the facts, and maybe I can give you some argument to try to win over people, but the facts are that there are just not enough people in the field. There have not been enough people doing this research. They have been doing other things. There's not enough people doing psychiatric research, but this is even the stepchild of psychiatry, which is a sad thing to say.

So that's really the fact. There just haven't been many people doing the work.

For instance, just this past year one study demonstrated that one medicine called tegretol given to a bunch of cocaine abusing people reduced the use in 90 percent. Well, you know, 18 months have passed, and we are talking about replicating that study.

You know, at this time there should have been 100 people doing that study given how important it is. We ought to have been talking about it in Washington. In fact, we did at the Senate meeting. That was one of the things we presented. Something that promising ought to be picked up and run with, but that's an example. We, for theoretical reasons come to that one treatment, and if it is true what Dr. Haloquist found, it might be an effective treatment for the majority of cocaine addicts. And, you will notice that all of us that sit at this table tell you that we can't treat it very well. We have successes, but we have many more failures than we have of that. There are other examples like that that you can use to argue with people, but I think it starts with the fact we haven't done enough work. If we do it, we need centers like this really doing it. When I was trying to develop this center, we looked around the country and there is only one other that's even vaguely like this, it's in Connecticut. Can you imagine there's not but one center in the United States really trying to tackle this problem in any substantial way?

Senator HOLLINGS. Don't tell anybody yet. Let's keep it going and maybe we can be the second center.

The biomedical community has been totally frustrated. They haven't had a comprehensive type of presentation on the advances and everything else. Funding has gone down. We haven't hired, as you and I both know, a senior research scientist at NIH in 10 years and everything else, so we are having a special hearing in Washington on March 28. If you can possibly mark it down, we need you on that particular score to testify.

Now, that's another subcommittee. I have got Labor, Health, and Human Services where we handle the appropriations for all of NIH medical research, and I think this is very, very significant, because if there is only one center even looking into it, we are way behind, and so with, as you're indicating now here to the human brain, the dramatic results that were found in genes and everything else in the recent years here, we got all kind of opportunities.

Dr. BALLENGER. I think another one that is really easy for people to understand is the other psychiatric problem that then leads to substance abuse, for which we now have an effective treatment, the best example being severe anxiety problems that are so scary and make people so miserable that they drink. If we treat the anxiety problem, then the drinking problem gets taken care of.

Now, we think that percentage of people with severe anxiety in the alcohol population is 20 to 35 percent of the whole alcohol population. If so, it's the largest single cause other than primary alcoholism, which we think is inherited, learned behavior.

Senator HOLLINGS. That's easy to understand. I knew many a lawyer when I was practicing that wouldn't come before a jury until he had a little pop to bolster himself and make him loosen up and talk a little more glibly, he thought, but I mean that was the case.

Dr. BALLENGER. If he had 35 panic attacks a day, he would need 35 pops.

Senator HOLLINGS. That's right. That's the whole thing.

Dr. BALLENGER. That's right. So that's another example of something we already know which is not in the field. We got the first grant in the history of NIH to study that problem this year. So it's not that we don't know anything, we just don't know everything, and I am quick to admit that. But we know some things that can already make a difference, and I think people can understand examples like that, even skeptics.

TECHNICAL EDUCATION FOR TRAINING

Senator HOLLINGS. I am convinced of it. I know now we got to do a heck of a lot more training, and in your particular field with NIH and everything else. Now on to DARE, and what have you, and what you are talking about, Mr. Young, there's no reason that we cannot in our technical training system interconnected with TV and everything else, use that to train officers and teachers in drug education. In fact, I did it with SLED 30 years ago. We put it in criminal justice and everything else. The rural folks could come in and interface with you and gain this kind of training and skills since they can't afford to go to Columbia. I have 8 DARE officers but I need 100. So how do I get the other 92? Let's get our own technical training system started laying on these programs, so folks don't have to go all the way to Los Angeles to get that kind of training to come back under the DARE Program. We can start that right here and produce the officers a lot more economically, and even use volunteers as you have done in the Florence area.

We had one senior citizen come here from the AARP, and they are voluntarily merging Crime Stoppers with Drug Stoppers to work on both and to do the training using volunteer senior citizens in that regard and they go out into the schools. There are a lot of ways we can make our limited resources go further.

This is the best series of hearings our subcommittee has had, and mind you me with staffs here on both sides, Republican and Democrat, they will be reading over this hearing record.

I can't think, but are there any comments that you want to make or does anyone want to correct anything that was said, Mr. Young, or Dr. Greer?

Do you feel better now, Mr. Hiers?

Mr. HIERS. I feel fine.

Senator HOLLINGS. Me, too, because the work that Jerry McCord and his group is doing is just outstanding, and it's been nationally recognized, and our drug abuse problems are not mutually exclusive in psychiatry or the research end or anything else like that. You all work on the same side of the street.

Thank you very, very much.

Dr. GREER. Thank you.

Dr. BALLENGER. Thank you, sir.

Mr. YOUNG. Senator, I would just like to say one thing in closing, and that's a respect and appreciation I have for you, sir, to take 3 days of your time to go across this State and look at this problem in every dimension, and that's not a passing fancy with you. We know of your commitment to doing something clear back when you were Governor of this State and all the way forward, and we, in addition, in the field owe you a tremendous debt.

Senator HOLLINGS. I just hate to lose, and we have been losing. Everybody agrees on that. I want to start winning this war on drugs.

CONCLUSION OF HEARINGS

Thank you all very, very much. The subcommittee will be in recess subject to the call of the Chair.

[Whereupon, at 4:15 p.m., Wednesday, February 14, the hearings were concluded, and the subcommittee was recessed, to reconvene subject to the call of the Chair.]

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